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FOOD STAMP

MANUAL

The Commonwealth of Massachusetts



Department of Public Welfare

COMMONWEALTH OF MASSACHUSETTS

CODE OF MASSACHUSETTS REGULATIONS

TITLE 106

DEPARTMENT OF PUBLIC WELFARE

FOOD STAMP MANUAL

CHAPTERS 360 - 369

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360.010: Purpose

The purpose of the Food Stamp Program is to raise the nutritional level among low income households whose limited food purchasing power contributes to hunger and malnutrition among such households. The determination of eligibility and benefit level for applicant households is the certification process. The purpose of this handbook is to provide Department staff with the policy and procedures necessary to accomplish the certification of eligible households.

360.020: Authority

The authority for the policies contained in this manual is the Food Stamp Act of 1977 and the resulting regulations promulgated by the United States Department of Agriculture (USDA) in Chapter 7 of the Code of Federal Regulations, Parts 270 through 282 to implement the law.

360.030: Definitions (Reserved)360.100: Uses of Food Coupons

Food coupons or stamps are designed for use by participants to purchase eligible foods, including seeds and plants, for home consumption and use. Other persons may be designated by the household to perform the purchasing function. Households are not required to have cooking facilities or access to cooking facilities to participate in the program.

360.120: Special Uses of Food Coupons

Although food coupons were originally intended for use by eligible households to purchase foods for home consumption, certain households have been authorized to use their coupons to obtain prepared meals or to facilitate their obtaining food. These authorized special uses for food coupons are:

(A) Communal Dining

- (1) Eligible Household Members - Eligible household members 60 years of age or over and their spouses may use all or part of the coupons issued to them to purchase meals prepared especially for them at communal dining facilities authorized by USDA for that purpose.

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(2) Types of Facilities - Communal dining facilities include senior citizens centers, apartment buildings occupied primarily by elderly persons, public or private nonprofit establishments (eating or otherwise) that feed elderly persons, and federally subsidized housing for the elderly at which meals are prepared for and served to the residents. It shall also include private establishments that contract with an appropriate State or local agency to offer meals at concessional prices to elderly persons.

(B) Meals on Wheels

(1) Eligible Household Members - Eligible household members 60 years of age or over or members who are housebound, feeble, physically handicapped or otherwise disabled to the extent that they are unable to adequately prepare all their meals, and their spouses, may use all or part of the coupons issued to them to purchase meals from a nonprofit meal delivery service authorized by USDA.

(2) Types of Services - Meal delivery service may be provided by a political subdivision, a private nonprofit organization, or a private establishment with which a State or local agency has contracted and which is authorized by USDA.

(C) Addicts and Alcoholics in Treatment Programs. Members of eligible households who are narcotic addicts or alcoholics and who regularly participate in a drug or alcoholic treatment and rehabilitation program may use all or part of the coupons issued to them to purchase meals provided for them during the course of such programs by a private nonprofit organization or institution approved by the United States Department of Agriculture for that purpose.

(D) Residents of Group Living Arrangements. Eligible residents of group living arrangement facilities, acting on their own behalf, may use coupons issued to them to purchase meals prepared at the facility especially for them if the facility is authorized by the United States Department of Agriculture for that purpose.

(E) Residents of Shelters for Battered Women and Their Children. Residents of shelters for battered women and their children, as defined in Section 365.550, may use their coupons to purchase meals prepared by the shelter. The shelter may redeem the coupons at a wholesale food store, if authorized to do so by USDA, or may redeem them at a retail food store as the household's authorized representative.

360.200: Non-Discrimination

There shall be no discrimination against any applicant or recipient in the administration of the Food Stamp Program for reasons of age, race, color, sex, handicap, religious creed, national origin, or political beliefs. These administrative activities include the certification of households, the issuance of coupons, the conduct of fair hearings or the conduct of any other program service.

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360.210: Verbal Complaints

In the event an individual verbally alleges that a discriminatory act has been committed, but the individual refuses or is reluctant to put it in writing, the worker receiving the complaint shall do so. Each discrimination complaint should contain the following information:

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- (A) Name, address and telephone number or other means of contacting the complainant:
- (B) Location and name of the organization or office which is accused of discriminatory practices:
- (C) The nature of the incident or action or the aspect of program administration that led the complainant to allege discrimination:
- (D) The reason for the alleged discrimination (age, race, color, sex, handicap, religious creed, national origin or political beliefs):
- (E) Names, titles and addresses of persons who may have knowledge of the discriminatory acts: and
- (F) The date or dates on which the alleged discriminatory actions occurred.

The worker shall promptly forward these complaints to the Office of Assistance Payments, 600 Washington Street, Boston 02111. Complaints will be accepted even if all the information is not provided, but persons who file complaints should be encouraged to provide the information to facilitate investigation. Investigations will be conducted only if the information in A through D above is provided.

360.220: Written Complaints

Any person who believes s/he has been subject to discrimination may file a written complaint with the Secretary of Agriculture or with the Administrator of the Food and Nutrition Service, Washington, D.C. 20250. Written complaints should contain the information described in Section 210. A complaint must be filed no later than 180 days from the date of the alleged discrimination. However, the time for filing may be extended by the secretary. The worker shall accept all complaints of discrimination, and forward them promptly to the Office of Assistance Payments, 600 Washington Street, Boston, 02111.

360.230: Public Notification

All offices of the Department shall prominently display the non-discrimination poster provided by the Department.

360.240: Racial - Ethnic Data Collection

The Department shall obtain data on households by racial ethnic category. The Racial/Ethnic categories are : American Indian or

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Alaskan Native, Asian or Pacific Islander, black (not of Hispanic origin), Hispanic and white (not of Hispanic origin).

Applicants shall be asked to identify voluntarily their race or ethnicity on the application form. When the information is not voluntarily provided on the application form, alternative methods of gathering the data, such as observation during the interview, will be employed.

360.300: Contents of the Case Record

The contents of the case record serve as documentation of the household's initial and continuing eligibility. The case record shall include applications for certification or recertification (including any required Department forms); worksheets used in the computation of income for eligibility and the basis of issuance; documentation including verification techniques used by the worker; copies of forms sent to the issuance unit authorizing or changing participation or basis of issuance; copies of notices of adverse action and other notices sent to the client and responses thereto; and actions related to the fair hearing process.

360.400: Disclosure of Confidential Information

The use or disclosure of information obtained from applicant households shall be restricted.

(A) Disclosure of Information to Recipients. If there is a written request by a responsible member of the household, its currently authorized representative or a person acting in its behalf to review materials contained in its case file, the material and information contained in the case file shall be made available for inspection in the presence of a Department employee during normal business hours. However, the Department may withhold confidential information, such as the names of individuals who have disclosed information about the household without the household's knowledge or the nature of status of pending criminal prosecutions.

(B) Disclosure of Information to All Others. The Department shall restrict the use or disclosure of information obtained from applicant households to persons directly connected with the administration or enforcement of the Food Stamp Act or regulations and persons directly connected with the administration or enforcement of other federally aided assistance programs and the General Relief Program.

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GENERAL PROVISIONS360.500: Availability of Food Stamp Program Information

Each CSAO/WSO shall maintain an updated Food Stamp Manual, including all procedural memos, as well as the Federal Regulations and Federal Procedures governing the program and the Plan of Operation, for examination by members of the public during regular office hours.

360.600: Quality Control

The Department maintains a quality control system to monitor the administration of the program and insure that determinations of eligibility and benefit level are made in accordance with Food Stamp Program policy. The Department must take corrective action to reduce the incidence of errors which are found and documented by quality control staff. Any household which refuses to cooperate (see 106 CMR 361.400) and furnish information for quality control purposes shall be determined ineligible for Food Stamp assistance. Once denied or terminated the household shall remain ineligible until it does cooperate.

360.700: Use of Social Security Numbers

The Department shall require households participating in the Food Stamp Program or applying for participation in the Food Stamp Program to provide a Social Security number for all household members 18 years of age and older and for any member under 18 who has countable income. The Department shall explain to applicants and recipients that refusal to provide a Social Security number will result in disqualification of the individual for whom a Social Security number is not provided. The household shall be informed that the Social Security numbers will be used in the administration of the program. The Department will use the Social Security numbers to prevent duplicate participation, to facilitate mass changes in benefits, and to determine the accuracy and reliability of the information given by the household.

The Department shall have access to information on food stamp applicants and recipients who receive SSI benefits through the State Data Exchange (SDX) system.

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360.800: Funding

Provision of benefits in the Food Stamp Program is subject to the availability of sufficient appropriations by the United States Congress. In the event that the United States Department of Agriculture (USDA) reduces, suspends, or cancels program benefits, the Department shall administer the Food Stamp Program in conformity with USDA regulations concerning said reduction, suspension, or cancellation, notwithstanding any Department regulations to the contrary.

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The application process begins with a household's request for an application and ends with the Department's decision on eligibility. The process requires actions such as:

- (A) Making applications available;
- (B) Assisting a household to complete its application;
- (C) Interviewing a member of the household or an authorized representative;
- (D) Performing necessary collateral contacts and verifications;
- (E) Preparing necessary documents to authorize the issuance and use of food stamps for eligible households.

361.080: Prompt Action

Eligible households must be given an opportunity to participate in the Food Stamp Program no later than 30 calendar days after their date of application, (see Section 361.120). An opportunity to participate means that the household has received its ATP and that an authorized issuing office is open and available for the household to obtain its allotment of stamps. Expedited service shall be provided to destitute and zero net income households (see 106 CMR 365.800 through 365.890). Benefits must be provided retroactively to the month of application for households which complete the application process within the required time frame and are eligible to receive benefits in the month of application.

361.100: Filing an Application

Households wishing to participate in the Food Stamp Program must submit an identifiable Food Stamp Program application. An identifiable food stamp application contains the applicant's name and address and is signed by a responsible member of the household or the household's authorized representative. The application may be submitted in person, or by an authorized representative, or by mail.

361.110: Where to File

The application must be filed with the Community Service Area Office (CSAO) or Welfare Service Office (WSO) which serves the city or town in which the household resides.

Households consisting only of SSI applicants or recipients (i.e., pure SSI households) may file the application at the SSA office.

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361.120: Date of Application

For households consisting only of SSI applicants or recipients (i.e., pure SSI households) which apply for food stamps at an SSA office, the households date of application is the date the signed food stamp application is received by the SSA office. The SSA office shall date stamp each application on the date it is received to document the household's date of application.

For all other households, the household's date of application is the date an identifiable Food Stamp application is received by the appropriate CSAO/WSO. The CSAO/WSO shall date stamp each application on the date it is received to document the household's date of application.

361.130: Household Right to Same Day Filing

Households shall be advised of their right to same day filing of the application. Each office shall post signs which explain the application processing standards and the household's right to same day filing. In addition the household shall be informed that it does not have to be interviewed before filing its application and that it may file an incomplete application as long as the form contains the applicant's name and address and is signed by a responsible member of the household or the household's authorized representative.

Department staff shall encourage households to file an application form the same day the household or its representative contacts the food stamp office in person or by telephone and expresses an interest in obtaining food stamps. If a household contacts the wrong CSAO/WSO, either in person or by telephone, the office shall give the household the address and telephone number of the appropriate office, and shall offer to forward the household's application to the appropriate office if the household has completed enough information on the application to file. The household shall be informed that its application will not be considered filed and the processing standards shall not begin until the application is received at the appropriate office. If the household has mailed its application to the wrong office, that office shall mail the application to the appropriate office the same day.

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If the household has contacted the food stamp office by telephone but does not wish to come to the office to file an application that same day and instead prefers receiving an application through the mail the office shall mail the application form to the household on the same day the telephone request for food stamp assistance is received. If the household contacts the wrong Food Stamp office, that office shall mail the household an application the same day and advise the household of the address of the office to which the application must be returned. If a household makes a written request for food stamp assistance, the office shall mail the application form to the household on the same day the written request for food stamp assistance is received.

361.150: Withdrawal of Application

The household may voluntarily withdraw its application at any time prior to the determination of eligibility. The worker shall document in the case file the reason for withdrawal, if given, and that contact was made with the household to confirm the withdrawal. The household shall be advised of its right to reapply at any time subsequent to a withdrawal.

361.160: Handling Applications for PA Households

To facilitate their participation in the program, households in which all members are applying for cash assistance shall be allowed to apply simultaneously for food stamp benefits. However, the household's food stamp eligibility and benefit level shall be based solely on food stamp eligibility criteria and the household shall be certified in accordance with the Food Stamp Program notice and processing standards even when these standards are different than those of the cash grant program. Special procedures for taking and processing food stamp applications for these households are contained in 106 CMR 365.100 through 365.150.

361.170: Handling Applications for Mixed Households

Mixed households in which some members, but not all, are applicants/recipients of cash assistance, shall be required to file a separate application for food stamp assistance at the appropriate CSAO/WSO. Department staff shall inform mixed households of their right to file for food stamp assistance if they are not already receiving stamps. These households are classified as NPA households and are subject to all Food Stamp Program requirements for NPA households.

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361.160: Handling Applications for PA Households

To facilitate their participation in the program, households in which all members are applying for cash assistance shall be allowed to apply simultaneously for food stamp benefits. However, the household's food stamp eligibility and benefit level shall be based solely on food stamp eligibility criteria and the household shall be certified in accordance with the Food Stamp Program notice and processing standards even when these standards are different than those of the cash grant program. Special procedures for taking and processing food stamp applications for these households are contained in 106 CMR 365.100 through 365.150.

361.170: Handling Applications for Mixed Households

Mixed households in which some members, but not all, are applicants/recipients of cash assistance, shall be required to file a separate application for food stamp assistance at the appropriate CSAO/WSO. Department staff shall inform mixed households of their right to file for food stamp assistance if they are not already receiving stamps. These households are classified as NPA households and are subject to all Food Stamp Program requirements for NPA households.

361.180: Handling Applications for Destitute and Zero Net Income Households

Each office shall designate an individual(s) to identify households eligible for expedited certification and issuance. The designated individual shall screen applications as they are filed or as individuals come into the office to apply.

FOOD STAMP PROGRAM
THE APPLICATION PROCESS361.180: Handling Applications for Destitute and Zero Net Income Households

Each office shall designate an individual(s) to identify households eligible for expedited certification and issuance. The designated individual shall screen applications as they are filed or as individuals come into the office to apply.

361.190: Handling Applications of Pure SSI Households

Households consisting only of SSI applicants or recipients (i.e., pure SSI households) may, if they so choose, apply for food stamps at a Social Security Administration (SSA) office. SSA shall handle applications of pure SSI households which have not applied for food stamps in the preceding thirty days and which do not have food stamp applications pending. SSA shall inform SSI applicants/recipients of this right whenever SSI applicants/recipients transact business at the SSA office.

SSA shall accept and complete food stamp applications filed at the SSA office by pure SSI households and shall forward them to appropriate CSAO/WSO's within one working day after receipt of the signed applications. On a form attached to the application SSA will indicate required verifications which are on file at the SSA office. Items verified and on file at the SSA office are considered verified for food stamp purposes. An application shall be considered filed for normal processing standards on the date the identifiable application is received by SSA. For expedited service, processing time standards begin the date the appropriate CSAO/WSO receives the application. Food stamp eligibility shall be based solely on food stamp eligibility criteria.

At initial application, pure SSI households which have applied at the SSA office shall not be required to see a departmental certification worker or be subjected to an additional interview. The worker shall not contact the household in order to obtain information for certification for food stamps unless: the application is improperly completed; mandatory verification is missing; or the worker determines certain information on the application is questionable. In no event would the applicant be required to appear at the CSAO/WSO to finalize the eligibility determination.

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361.200: Household Concept

A food stamp household may be composed of any of the following individuals or groups of individuals:

- (A) An individual living alone;
- (B) An individual living with others, but customarily purchasing food and preparing meals for home consumption separate and apart from the others; or
- (C) A group of individuals living together for whom food is customarily purchased in common and for whom meals are prepared together for home consumption.

361.210: Restrictions on Separate Household Status

The following individuals residing with the household may not be granted separate household status. They must be considered members of the food stamp household.

- (A) Children under eighteen years of age under the parental control of a member of the household.
- (B) Natural/adoptive parent(s) living with their child(ren) (regardless of age), or child(ren) living with their natural/adoptive parent(s) unless at least one parent is 60 years of age or older.
- (C) A spouse of a member of the household. Spouse refers to either two individuals:
 - (1) who are legally married to each other; or
 - (2) who are living together and are holding themselves out to the community as husband or wife by representing themselves as such to relatives, friends, neighbors, or tradespeople.

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Primary responsibility for designating the person to be named the head of household rests with the household. The worker may assist in this determination. Generally, the head of household files the application for food stamps. However, if the head of household does not file the application, the spouse or another household member may apply for the household.

361.230: Non-household Members

In some cases individuals residing with a household cannot be considered household members. Such persons are termed non-household members. Except for disqualified individuals, the non-household member's income and resources shall not be considered in determining the household's eligibility and benefit level. Non-household members who are otherwise eligible may participate in the program as separate households. Non-household members include:

(A) Roomers. Roomers are individuals to whom the household furnishes lodging but not meals, for compensation.

(B) Live-in Attendants. Individuals who reside with a household to provide medical, housekeeping, child care or other similar personal services to a household member(s).

(C) Ineligible Aliens. Individuals who do not meet the citizenship or eligible alien status.

(D) Students. Persons enrolled in an institution of higher education who are ineligible because they fail to meet the eligibility criteria set forth in 106 CMR 362.410.

(E) Disqualified Individuals. Persons who have been disqualified for fraud, as described in the section of this manual on fraud disqualification, and persons disqualified for failure to comply with the requirement to provide and verify a Social Security number as described in 106 CMR 362.500.

(F) Others. Individuals who share living quarters with the household but who do not customarily purchase food or prepare meals with the household. For example, if an applicant household shares its living quarters with another family to save rent, but the two households do not purchase and prepare meals together, each family would be a separate food stamp household.

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of the household which provides the meals and lodging. If the boarder makes separate payments for meals and room, only the amount paid for meals will be evaluated to determine if the payment is a reasonable monthly amount. Individuals purchasing meals from a household and living at a different address may not be considered a boarder or a household member regardless of the price paid for meals. (See 106 CMR 365.200 through 365.240)

(2) Reasonable monthly board payment - a reasonable monthly payment is determined by the number of meals the boarder receives from the household. The payment must be made in cash. Under no circumstances shall food stamps be paid for meals and be credited toward the monthly payment. A reasonable monthly payment shall be one of the following.

a. Three or more meals daily - Boarders receiving three or more meals daily from the boarding household must pay an amount equal to or exceeding the maximum coupon allotment for the boarder's household size.

b. Two or less meals daily - Boarders receiving two meals or less each day from the boarding household must pay an amount which equals or exceeds two thirds of the maximum coupon allotment for the boarder's household size.

(C) Live-in attendants. Individuals who reside with a household to provide medical, housekeeping, child care or other similar personal services to a household member(s).

(D) Ineligible Aliens. Individuals who do not meet the citizenship or eligible alien status.

(E) Students. Persons enrolled in an institution of higher education who are ineligible because they fail to meet the eligibility criteria set forth in 106 CMR 362.410.

(F) Disqualified Individuals. Persons who have been disqualified for fraud, as described in the section of this manual on fraud disqualification, and persons disqualified for failure to comply with the requirement to provide and verify a Social Security number as described in 106 CMR 362.500.

(G) Others. Other individuals who share living quarters with the household but who do not customarily purchase food or prepare meals with the household. For example, if an applicant household shares its

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361.240: Ineligible Households

(A) Residents of Commercial Boarding Houses. Residents of commercial boarding houses are not eligible to participate in the Food Stamp Program. For program purposes, a commercial boarding house shall be defined as an establishment which is licensed as a commercial enterprise, and offers meals and lodging for compensation. In cities and towns without licensing requirements, a commercial boarding house shall be defined as a commercial establishment which offers meals and lodging for compensation with the intent of making a profit. The number of boarders residing in a boarding house shall not be used to determine if a boarding house is a commercial enterprise. The household of the owner of a boarding house may participate in the program as a household separate and apart from the residents of the boarding house, if the owner's household meets all the eligibility requirements for program participation (see 106 CMR 365.250 through 365.290).

(B) Residents of Institutions. Individuals shall be considered residents of institutions when the institution provides them with the majority of their meals as part of the institution's normal services and the institution has not been authorized by the United States Department of Agriculture to accept food stamps. Residents of institutions are not eligible for participation in the program, with the following four exceptions:

(1) Residents of federally subsidized housing for the elderly built under either Section 202 of the Housing Act of 1959 or Section 236 of the National Housing Act. Eligible residents do not have to be elderly to participate in the Food Stamp Program.

(2) Narcotic addicts or alcoholics who for the purposes of regular participation in a drug or alcohol treatment and rehabilitation program reside at a facility or treatment center (see 106 CMR 365.600).

(3) Blind or disabled residents of a group living arrangement, as defined in 106 CMR 365.620, who receive benefits under Title II (RSDI) or Title XVI (SSI) of the Social Security Act. Eligible residents of such facilities shall be entitled to participate effective July 1, 1980. Application for retroactive benefits shall be accepted until June 30, 1981.

(4) Residents of shelters for battered women and their children as defined in Section 365.550.

(C) SSI Recipients. California and Wisconsin have been designated "cash out" states by the Secretary of Health and Human Services. SSI recipients living in these two states are ineligible to participate in the Food Stamp Program. "Cash out" means that the payments made to SSI recipients in California and Wisconsin have been increased to include the value of the food stamp allotment in the monthly benefit check.

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(D) Boarders

A boarder is an individual residing with a household and paying a reasonable monthly payment to the household for lodging and meals. Boarders are ineligible to participate in the Food Stamp Program. The household with which the boarder resides, however, may participate in the program if otherwise eligible. See Section 365.200 for handling households with boarders.

- (1) Reasonable Monthly Payment. A reasonable monthly payment is determined by the number of meals the boarder receives from the household. The payment must be in cash. If the individual makes separate payments for meals and lodging, only the amount paid for meals will be evaluated to determine if the payment is a reasonable monthly amount.
 - a. Three or more meals daily - Boarders receiving three or more meals daily from the household must pay an amount equal to or exceeding the maximum coupon allotment for the boarder's household size.
 - b. Two or less meals daily - Boarders receiving two meals or less each day from the household must pay an amount which equals or exceeds two-thirds of the maximum coupon allotment for the boarder's household size.
- (2) Restrictions on Boarder Status. Boarder status may not be granted to the following individuals:
 - a. children under 18 years of age under the parental control of a member of the household;
 - b. either natural/adoptive parent(s) living with their child(ren), regardless of age, or child(ren) living with their natural/adoptive parent(s) unless at least one parent is 60 years of age or older;
 - c. a spouse (as defined in Section 361.210(C));
 - d. persons paying less than a reasonable monthly payment for meals. If an individual pays less than a reasonable monthly payment, s/he will be considered a member of the household which provides meals and lodging.

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(E) Strikers

Generally, households with a striking member(s) shall be ineligible to participate in the Food Stamp Program. For food stamp purposes a striker is: anyone involved in a strike; a concerted work stoppage by employees (including a work stoppage by reason of an expiration of a collective bargaining agreement); any concerted work slowdown; or other concerted interruption of operations by employees.

Any employee affected by a lockout (i.e., the suspension of work or closing of a plant by an employer during a labor dispute) is not considered a striker.

Exceptions to the ineligibility for program benefits of household's with a member on strike are:

- (1) Persons Exempt from Work Registration. An individual on strike who is exempt, or eligible for exemption, from the food stamp work registration requirements (See Section 362.330) other than by reason of employment (362.330(G)) is not considered a striker for food stamp purposes. These households should be handled in the same manner as any other food stamp household. The restrictions in (2) below do not apply to these households.
- (2) Eligible Striker Household. Households receiving food stamp benefits or eligible to receive benefits immediately prior to a member going on strike, are not ineligible for food stamp benefits because a household member is a striker. However, the household shall not receive an increased benefit allotment as a result of a decrease in the income of the striking member. Instructions for calculating the income of eligible striker households are set forth in Section 365.300.

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Page 361.300361.300: Authorized Representative

(A) Definition. An authorized representative is a person designated by the head of a household, spouse or other responsible household member to act on behalf of the household in applying for program benefits or obtaining or using the stamps. A private nonprofit organization or institution conducting a drug addiction or alcoholic treatment and rehabilitation center or nonprofit group living arrangement may also serve in this capacity.

(B) Purpose. An authorized representative is designated to enable a household to participate in the Food Stamp Program when the head of the household, spouse or other household member is unable to make application or obtain coupons or purchase food.

361.310: Authorized Representative to Make Application

When the head of household, spouse or other household member cannot apply for the household, an authorized representative may be designated for that purpose.

(A) Requirements for Appointments. The authorized representative must be:

- (1) Designated in writing by the head of the household, or the spouse, or other responsible household member; and
- (2) An adult who is sufficiently aware of relevant household circumstances to represent the household.

Exception: In the event the only adult member of a household is classified as a non-household member (see Section 361.230), that person may be designated as the authorized representative for the minor household members. For example, an SSI recipient who is the grantee for children on AFDC may act as the authorized representative for the children in making an application for food stamps.

(B) Household Liability. Except as provided in 106 CMR 365.650, the household shall be held liable for any overissuance which results from erroneous information given by the authorized representative. Therefore, it is important that the head of household or spouse or other responsible household member prepare and review the application whenever possible even though the authorized representative will actually be interviewed. If it is determined that a household member collaborated with the authorized representative to commit fraud, the household member is subject to fraud hearing procedures. If a finding of fraud is made at the hearing, the household member would be disqualified and a fraud claim established against the household.

361.320: Authorized Representative to Obtain Stamps

The designation of an authorized representative shall be made at the time the application is completed and the authorized representative shall be named on the Identification Card. The authorized representative designated to obtain the stamps may be the same individual designated to make an application for the household or may be another person. Even if a household member is able to make application and obtain stamps, the household should be encouraged to name an authorized representative for obtaining stamps in case of illness or other circumstances which may result in the household's inability to obtain stamps.

361.330: Authorized Representative to Purchase Food

The authorized representative may use stamps to purchase food for the household's consumption with the full knowledge and consent of the household. The authorized representative must have the household's ID card when purchasing food.

361.340: Emergency Authorized Representative

The household may designate an emergency authorized representative on the ATP in the event that neither a household member nor the authorized representative is able to obtain stamps.

361.350: Drug Addict/Alcoholic Treatment Centers and Group Living Arrangements as Authorized Representatives

Narcotic addicts or alcoholics who regularly participate in a drug or alcoholic treatment program on a resident basis, and blind or disabled residents of group living arrangements who receive benefits under Title II (RSDI) or Title XVI (SSI) of the Social Security Act may elect to participate in the Food Stamp Program.

(A) Drug Addict/Alcoholic Treatment Centers. Residents shall apply and be certified for program participation through the use of an authorized representative who shall be an employee of and designated by the private nonprofit organization or institution that is administering the treatment and rehabilitation program. The center shall receive and spend the coupon allotment for food prepared by and/or served to the addict or alcoholic. The organization or institution shall also be responsible for complying with the provisions described in 106 CMR 365.600 through 365.690.

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(B) Group Living Arrangements. Residents shall either apply and be certified through the use of an authorized representative employed and designated by the group living arrangement or apply and be certified on their own behalf or through an authorized representative of their own choice. The group living arrangement shall make the determination whether a resident must apply through the facility's authorized representative, or may apply on his/her own behalf or through the use of an authorized representative of his/her own choice. The determination shall be based on the resident's physical and mental ability to handle his/her own affairs. When acting as the resident's authorized representative, the group living arrangement may either receive and spend the coupon allotment for food prepared by and/or served to the resident, or allow the resident to use all or any portion of the allotment on his/her own behalf. The facility shall be responsible for complying with the provisions described in 106 CMR 365.600 through 365.690. If the group living arrangement has had its status as an authorized representative suspended by the United States Department of Agriculture, residents applying on their own behalf may still participate if otherwise eligible.

361.360: Restrictions on Appointments

(A) Department employees involved in the certification or issuance processes and retailers authorized to accept food stamps may act as

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an authorized representative only with the written approval of the CSAO/WSO Director when s/he determines that no one else is available to serve.

(B) Individuals disqualified for fraud shall not act as authorized representatives during the period of disqualification, unless a disqualified individual is the only adult member of the household able to act on its behalf and the worker has determined that no one else is available to serve. The worker shall separately determine whether these individuals are needed to apply on behalf of the household, to obtain stamps, and to use the stamps for food. For example, the household may have an authorized representative to obtain the stamps each month, but not be able to find anyone to purchase food regularly with the stamps. If the worker cannot locate anyone to serve as an authorized representative to purchase food regularly with the stamps, the disqualified member shall be allowed to do so.

361.370: Documentation and Control of Authorized Representatives

The worker shall insure that authorized representatives are properly designated. The name of the authorized representative shall be contained in the household's case file. Limits shall not be placed on the number of households an authorized representative may represent. In the event that a single authorized representative has access to a large number of ATP(s) or stamps, such as an employer of migrant or seasonal farm workers who is designated as an authorized representative for several households, the worker should exercise caution that:

(A) The household has freely requested the assistance of the authorized representative,

(B) The household's circumstances are correctly represented and the household is receiving the correct amount of benefits, and

(C) The authorized representative is properly using the stamps. When it is suspected that an authorized representative is not properly using stamps, the worker shall report the possible misuse of stamps to the Office of Assistance Payments, 600 Washington Street, Boston, Mass. 02111.

361.400: Household Refusal to Cooperate

To determine eligibility, the information on the application must be complete and the application signed, the household or its authorized representative must be interviewed, and certain information on the

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362.400: Student Status

Any person between the ages of 18 and 60 who is enrolled at least half time in an institution of higher education shall be ineligible to participate in the Food Stamp Program unless s/he meets one of the requirements of section 362.410. This section does not apply to persons who are physically or mentally incapable of gainful employment, persons attending high school, persons participating in on-the-job training programs, or to persons enrolled full time in schools and training programs which are not institutions of higher education.

An institution of higher education is any institution or program which is recognized by a Federal, State, or local government agency and provides post high school education. This includes, but is not limited to, colleges, universities, and technical schools.

Persons who claim exemption from this section because of physical or mental disability must provide verification when the disability is not evident. Appropriate verification consists of receipt of temporary or permanent disability benefits from a governmental or private source, such as RSDI and SSI, or a statement from a physician or psychologist.

362.410: Eligibility

In order to be eligible to participate in the Food Stamp Program any student, as defined in section 362.400, must meet at least one of the following criteria.

(A) Be employed at least 20 hours per week;

(B) Participate in a federally funded work study program during the regular school year;

(C) Be the head of a household (or the spouse of the head of household) containing one or more other persons who are dependents of that individual because he or she supplies more than half of their support, as defined in section 362.430; or

(D) Be enrolled in an institution of higher education as the result of participation in the Work Incentive Program.

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application must be verified. If the household refuses to cooperate with the worker in completing this process, the application shall be denied at the time of refusal. For a determination of refusal to be made, the household must be able to cooperate, but clearly demonstrate that it will not take actions that it can take and which are required, to complete the application process. For example, refusal to be interviewed shall result in a denial; failure to keep an appointment for an interview shall not result in a denial. If there is any question as to whether the household has merely failed to cooperate as opposed to refused to cooperate, the household shall not be denied. The household shall also be determined ineligible if it refuses to cooperate in any subsequent review of its eligibility, including reviews generated by reported changes, recertifications, or as part of a Quality Control review. Once denied or terminated for refusal to cooperate, the household may reapply but shall not be determined eligible until it cooperates.

361.500: Interviewing Households

At initial certification, an interview shall not be conducted with pure SSI households which have filed an application at an SSA office (see Section 361.190).

All other applicant households, including those submitting applications by mail, shall have a face-to-face interview in the food stamp office unless the office interview requirement is waived as provided in Section 361.510. The interview shall be conducted by the worker prior to initial certification and at all recertifications. The individual interviewed may be the head of household, spouse, other responsible member of the household, or the household's authorized representative.

361.510: Waiver of the Office Interview

The following households shall not be required to complete a face-to-face interview in the food stamp office. For these households the interview will be conducted by telephone or by home visit. However, home visits shall be used only if the time of the visit is scheduled in advance with the household.

(A) Waiver Granted upon Request. Any household which is unable to appoint an authorized representative and which has no household member able to come into the office because they are 65 years of age or older, or are mentally or physically handicapped, shall be granted a waiver of the office interview.

(B) Waiver Granted on Case-by-Case Basis. A waiver of the interview requirement shall be granted on a case-by-case basis to any household which is unable to appoint an authorized representative and which has no household member able to come into the office because of transportation difficulties or similar hardships. Hardship conditions include,

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but are not limited to: illness, care of a household member, prolonged severe weather or work hours which preclude an office interview. Mere inconvenience (i.e. it is easier for the client to be interviewed by telephone or to have the worker make a home visit than to go to the office) is not sufficient reason to waive the office interview. The worker shall determine if the transportation difficulty or other hardship reported by the household warrants a waiver of the office interview requirement and shall fully document in the case record why a request for a waiver was granted or denied.

361.520: Verification When Office Interview is Waived

Waiver of the office interview does not exempt the household from the verification requirements described in sections 600 through 660. However, special procedures may also be used to permit the household to provide verification and thus obtain its benefits in a timely manner. For example, the worker may substitute a collateral contact in instances where documentary evidence would normally be provided.

361.530: Length of Certification when Office Interview is Waived

Waiver of the office interview shall not affect the length of the household's certification period.

361.540: Scheduling Interviews

The worker shall schedule face to face or out of office interviews as promptly as possible to ensure that eligible households are able to obtain stamps within 30 calendar days after the date the application is filed. If a household fails to appear for the first interview, the worker shall attempt to schedule another interview. The interview shall be rescheduled by the worker without requiring the household to provide good cause for failing to appear. However, if the household does not appear for the rescheduled interview, the worker need not schedule any further interviews unless the household requests that another interview be scheduled.

361.550: Content of Interviews

The purpose of the interview is to establish to the satisfaction of the worker that the actual facts of the case are consistent with the information on the application or on previous applications and with other information known to the worker concerning household income and circumstances and to establish, subject to subsequent verification, whether or not the household is eligible for food stamp assistance. To accomplish this purpose the worker shall use interview techniques that

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explore and resolve with the household unclear and incomplete information. Merely reviewing the application for completeness is no substitute for a complete interview.

The interview is an official and confidential discussion of household circumstances with the applicant. The applicant should be made to feel at ease during the interview and the confidentiality of the information provided by the applicant must be protected. The scope of the interview may not extend beyond an examination of household circumstances which directly relate to the determination of household eligibility and benefit level.

During the interview the worker shall fully advise the household of its rights and responsibilities, including an explanation of the application processing standards and the household's responsibility to report changes.

361.600: Verification

Verification is the use of third party information or documentation to establish the accuracy of the information provided by the applicant. Sections 600 through 660 set forth requirements for verification. Application of these requirements to each eligibility factor is discussed in the sections dealing with the particular eligibility factor. Section 995 contains a chart which summarizes verification requirements at initial certification, at recertification and at the time of a reported change.

361.610: Verification Requirements at Initial Certification

(A) Gross Non-Exempt Income. The existence and amount of the household's gross non-exempt income must be verified prior to initial certification. Verification of exempt income is required when the information provided by the applicant/recipient is questionable (see Section 620). If all attempts to verify gross non-exempt income are unsuccessful because the person or organization providing the information has failed to cooperate with the applicant/recipient, the worker must determine the household's gross monthly non-exempt income for certification based on the best available information.

(B) Alien Status. Household member(s) identified as aliens on the application must verify their alien status prior to initial certification. Only those aliens described in 106 CMR 362.200 through 362.270 are eligible for participation in the Food Stamp Program.

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(C) Utility Expenses. Actual utility expenses higher than the standard allowance claimed by a household entitled to use the standard allowance, must be verified if use of the actual utility expenses would result in a deduction. When the actual utility expenses cannot be verified in time to meet the 30 day application processing standard, the standard allowance is used to determine the household's eligibility and benefit level. If the household subsequently verifies the actual utility expenses, the worker shall treat the information as a reported change. If the household is ineligible because the claimed, but unverified utility expense is disallowed, the worker shall send a Notice of Pending/Denial on the 30th day following the date of application.

(D) Medical Expenses. The amount of allowable medical expenses, including the amount of reimbursement (e.g., by a third party insurer), must be verified prior to initial certification if use of the expenses would actually result in a deduction. Additional verifications relevant to the claimed medical expenses, such as the allowability of services provided or the eligibility of the person incurring the cost, are not required unless the information provided by the applicant/recipient is questionable (see section 620 below).

(E) Liquid Resources. The existence and amount of any liquid assets must be verified prior to initial certification.

(F) Other Eligibility Factors. All other eligibility factors, financial or non-financial, are verified prior to initial certification when the information provided by the applicant is questionable and affects the household's eligibility or benefit level. Other eligibility factors include loans, residency, household composition, citizenship, student eligibility, circumstances relative to work registration and certain deductible expenses.

361.620: Questionable Information

To be considered questionable the information on the application must be inconsistent with statements made by the applicant, inconsistent with other information on the application or previous applications, or inconsistent with other information known or reported to the Department.

When determining if information is questionable, the worker must review each household's individual circumstances. For example, if a household reports expenses which exceed income, the worker may determine that further verification is required. This circumstance is not, in and of itself, grounds for denial. Instead, the worker must explore with the household how it is managing its finances, whether the household has resources or excluded income and how long the household has managed under these circumstances.

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361.630: Contradictory Information

When information from another source or on the application contradicts statements made by the household, either orally or in writing, the worker must give the household a reasonable opportunity to resolve the discrepancy prior to making an eligibility determination.

361.640: Sources of Verification

Sources of verification include documentary evidence, collateral contacts or home visits. In all cases the source of the verification must be documented in the case record.

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(A) Documentary Evidence. Workers shall use documentary evidence as the primary source of verification. Documentary evidence consists of a written confirmation of a household's circumstances. Examples of documentary evidence shall include: wage stubs, SDX data, and utility bills. Although documentary evidence shall be the primary source of verification, acceptable verification shall not be limited to any single type of document and may be obtained through the household or other source. Workers shall use an alternate source of verification such as a collateral contact or home visit, when documentary evidence cannot be obtained.

(B) Collateral Contact. A collateral contact is a verbal confirmation of a household's circumstances by a person outside of the household. The collateral contact may be made either in person or over the telephone. The acceptability of a collateral contact shall not be restricted to a particular individual but may be anyone who can be expected to provide accurate third-party verification of the household's statements. Examples of acceptable collateral contacts are employers, landlords, social service agencies, migrant service agencies, and neighbors of the household. The worker shall rely on the household to provide the name of any collateral contact. The household may request assistance in designating a collateral contact. The worker is responsible for obtaining verification from acceptable collateral contacts and is not required to use a collateral contact designated by the household if it cannot be expected to provide accurate third-party verification. When the collateral contact is unacceptable, the worker shall either ask the household to designate another collateral contact or substitute a home visit.

Note: SDX documents are not considered collateral contacts and therefore need not be designated by the household.

(C) Home Visit. Home visits shall be used as verification only if documentary evidence cannot be obtained or is insufficient to make a determination of eligibility or benefit level, and the visit is scheduled in advance with the household.

361.650: Responsibility for Obtaining Verification

The household has primary responsibility for providing documentary evidence to support its income statements and to resolve any questionable information, provided that nothing in this section shall limit the ability of the Department to verify information from other government agencies or from banks. Households may supply documentary evidence in person, through the mail, or through an authorized representative. The worker shall consider any reasonable documentary

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evidence provided by the household and shall be primarily concerned with how adequately the verification proves the statements on the application. If it would be difficult or impossible for the household to obtain the documentary evidence in a timely manner, or the household has presented insufficient documentation, the worker shall either offer assistance to the household in obtaining the documentary evidence, except when verification of shelter or utility costs for unoccupied homes would have to be obtained from a source outside the state, or shall use a collateral contact or home visit. The worker shall not require the household to present verification in person at the local office.

361.660: Documenting Verification

Case records must be documented to support eligibility, ineligibility, and benefit level determinations. The documentation shall be in sufficient detail to permit a quality control reviewer to determine the reasonableness and accuracy of the determination. Where verification was required to resolve questionable information, the worker shall document why the information was considered questionable and what documentation was used to resolve the questionable information. The worker shall also document the reason why an alternate source of verification, such as a collateral contact or home visit, was needed and the reason a collateral contact was rejected and an alternate requested.

361.700: Timeliness Standard for Processing

The worker shall determine the household's eligibility as soon as possible after the household or its authorized representative files the application. An application is filed the day the appropriate food stamp office, or in the case of certain SSI households, the date the SSA office receives an application containing the applicant's name and address, which is signed by either a responsible member of the household or the household's authorized representative (Section 361.120).

(A) Eligible Households. Households that are found to be eligible must be provided an opportunity to participate within 30 calendar days of their date of application. An opportunity to participate consists of providing households with an ATP, and having an issuance facility available for the household to obtain its allotment. The Department must mail the ATP at least 2 days in advance of the 30th day and assure that the ATP can be transacted after it is received, but before the 30-day standard expires.

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When this timeliness standard is met and the household is eligible for benefits in the month of application, benefits must be provided retroactive to the date of application.

(B) Households that are found to be ineligible shall be sent a Notice of Denial as soon as possible, but not later than 30 days following the date the application was filed. In the three situations described below, the application shall be denied on the 30th day. When an application is denied, the household must file a new application if it wishes to participate in the program.

(1) The household fails to appear for two scheduled interviews and

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makes no subsequent contact with the food stamp office to show interest in pursuing the application.

(2) The worker interviews the household and requests all necessary verification on the same day the application is filed, makes no additional requests for verification, assists the household in obtaining the verification as required in section 650 and the household fails to provide the verification by the 30th day of the application process.

(3) A household applying for both cash assistance and food stamps fails to comply with the cash assistance verification standards for any eligibility factor needed to determine both cash assistance eligibility and food stamp eligibility (see 106 CMR 365.120 (A) (3)).

361.800: Expedited Processing

Applicant households identified in the application screening process as destitute or at zero net income level are entitled to an expedited eligibility determination. The worker shall postpone certain verification requirements for these households. Eligible households certified on an expedited basis shall be issued an over-the-counter ATP on the same day the eligibility determination is made. The certification process for these households is discussed in the chapter on special situation households (see 106 CMR 365.800 through 365.890).

361.900: Delays in Processing

If an eligible household is not provided an opportunity to participate within 30 days or an ineligible household is not denied within 30 days, the worker must determine the cause of the delay. In the sections below, the word "fault" is used as an administrative term to establish the household's entitlement to retroactive benefits.

361.910: Household-Caused Delay

A delay is considered the fault of the household if household has failed to complete the application process even though the worker has taken all the action required to assist the household. The worker must have taken the actions in section 920 before a delay can be considered the fault of the household.

361.920: Department-Caused Delay

A delay shall be considered the fault of the Department if the household has met all its obligations in a timely manner, but the worker has failed to complete the application process in the appropriate time frames, or when the worker has failed to take the following actions:

(A) For households that have failed to complete the application form, the worker must have offered or attempted to offer the household help in completing it.

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(B) If one or more members of the household have failed to register for work (see 106 CMR 362.300 through 362.340), the worker must have informed the household of the need to register for work and given the household at least 10 days from the date of notification to register these members.

(C) In cases where verification is incomplete, the worker must have provided assistance when required in section 650 and allowed the household sufficient time to provide the missing verification. Sufficient time is at least 10 days from the date of the initial request for the particular verification that was missing.

(D) For households that have failed to appear for an interview, the worker must have attempted to reschedule the initial interview within 30 calendar days of the date the application was filed. However, if the household has failed to appear for the first interview and a subsequent interview is postponed at the household's request or cannot otherwise be rescheduled until after the 20th day but before the 30th day following the date the application was filed, the household must appear for the interview, bring verification, and register members for work by the 30th day; otherwise, the delay shall be the fault of the household. If the household failed to appear for the first interview and a subsequent interview is postponed at the household's request until after the 30th day following the application, the delay shall be the fault of the household. If the household has missed both scheduled interviews and requests another interview, any delay shall be the fault of the household.

361.930' Notification of Pending Status

If the worker cannot make an eligibility determination within the 30 calendar days because of a delay in processing, s/he shall send the household a Notice of Pending on the 30th day. The Notice of Pending will inform the household that its application has not been completed and is being processed. If some action by the worker is needed to complete the application process, s/he shall take immediate corrective action. If some action by the household is needed to complete the application process, the notice shall also explain what action the household must take and that its application will be denied if the required action is not taken within 60 calendar days of the date the application was filed. No further action is required by the worker after the Notice of Pending is sent if the household fails to take the required action within 60 calendar days of the date the application was filed.

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361.940: Providing Benefits to Eligible Households

If the delay in the first 30 day period is considered Department fault and the household was eligible for the month of application, benefits are provided retroactively to the date of application. If the delay in the first 30 day period is considered household fault, benefits are provided from the date the household completes the application process.

361.950: Notice of Denial to Ineligible Households

If the household is found ineligible during the second 30 day period, the worker shall issue a Notice of Denial to the household.

361.960: Delays Beyond 60 Days

If an eligibility determination is not made by the 60th day following the date the application was filed, the worker must insure that the application process is completed.

(A) Case Information and Verification Complete

In these circumstances the household has met all its obligations. The worker must continue to process the application until the household is found eligible or ineligible:

- (1) Eligible Households. Retroactive benefits are provided to eligible households in accordance with the provisions of Section 940 above.
- (2) Ineligible Households. If the household is found ineligible, the worker must issue a Notice of Denial to the household.

(B) Case Information or Verification Incomplete - Department Fault

When the case information or verification is incomplete and the Department is at fault at the end of the second thirty day period, the worker must continue to process the application until the household is found eligible or ineligible.

- (1) Eligible Households. Retroactive benefits are provided to eligible households in accordance with the provisions of Section 940 above.
- (2) Ineligible Households. If the household is found ineligible, the worker must issue a Notice of Denial to the household.

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(C) Case Information or Verification Incomplete - Household Fault.
When the case information or verification is incomplete and the household is at fault at the end of the second thirty day period, the application is denied.

(1) If the household is also at fault for the delay in the first 30 day period, the application is denied with no further notice to the household.

(2) If the Department is at fault for the delay in the first 30 day period, the worker must issue a Notice of Denial to the household. In these cases the household is not entitled to Lost Benefits for the first 30 day period.

VERIFICATION OF ELIGIBILITY FACTORS

Action	Residence	Citizenship	Alien Status	Tax Dept.	Work Reg.	Resources	Income	
							Excluded	Included
Cert.			VFY					VFY
Change			VFY					VFY*
Re-Cert			VFY					VFY

Cert. = initial certification

VFY = verify

Change = change during certification period

All other eligibility factors shall be verified when questionable.

Re-Cert. = recertification action

That is, inconsistent with statements made by the applicant, inconsistent with information on the application or previous applications or inconsistent with information known to the worker.

*If source has changed or amount has changed more than \$25.

EXPENSES

Action	Dependent Care	Utilities Actual Cost	Shelter
Cert.	VFY-1	VFY-2	VFY-1
Change	VFY-1	VFY-2	VFY-1
Re-Cert	VFY-1	VFY-2	VFY-1

VFY-1 = verify if results in a deduction and is questionable (see above).

VFY-2 = verify if amount claimed exceeds the Standard Utility Allowance and use of the actual cost would result in a deduction.

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361.995:

VERIFICATION OF ELIGIBILITY FACTORSTABLE A

CERTIFICATION ACTION	INCOME		RESOURCES	SOC. SEC NUMBERS	ALIEN STATUS	WORK REGISTRATION
	INCLUDED	EXCLUDED				
INITIAL CERTIFICATION	VFY		VFY	VFY	VFY	*
REPORTED CHANGE	VFY-1				VFY-2	
RECERTIFICATION	VFY			VFY-3	VFY-2	

- VFY - Verify in every case
 VFY-1 - If source has changed or amount has changed
 VFY-2 - If change reported
 VFY-3 - Verification of Social Security numbers at recertification is required only for newly obtained numbers and those numbers that were not previously verified
 * - Verification of work registration exemptions is required only when the information on the application is questionable (see section 361.620)

TABLE B

CERTIFICATION ACTION	MEDICAL EXPENSES	DEPENDENT CARE EXPENSES	UTILITY EXPENSES	OTHER SHELTER EXPENSES
INITIAL CERTIFICATION	VFY	VFY-1	VFY-2	VFY-1
REPORTED CHANGE	VFY-4	VFY-1	VFY-3	VFY-1
RECERTIFICATION	VFY	VFY-1	VFY-2	VFY-1

- VFY - Verify if use of the amount claimed results in a deduction
 VFY-1 - Verify if amount claimed is questionable and use of this amount results in a deduction
 VFY-2 - Verify if household is entitled to use the standard utility allowance and amount claimed exceeds the standard and use of this amount results in a deduction
 VFY-3 - Verify if source has changed or amount has changed by more than \$25
 VFY-4 - Verify if amount has changed by more than \$25

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362.050: Introduction

This chapter describes the non-financial eligibility standards that must be met by food stamp applicants and recipients. Nonfinancial eligibility standards are residency, citizenship and alien status, student eligibility, and work registration. These eligibility standards must be met by all household members prior to the determination of a household's financial eligibility.

362.100: Residency

A household must be living in the area covered by the certification office in which it files an application. In any month no individual may participate as a member of more than one household nor may any household participate in more than one state except with a valid Form FNS-286, (Transfer of Household Benefits) as discussed in Section 366.400-450. The only individuals exempt from these dual participation restrictions are certain residents of shelters for battered women and their children as defined in Section 365.550. Residency does not require an intent to permanently reside in the area. There is no durational residency or fixed residency requirement. Migrant campsites, for example, satisfy the residency requirement. However, individuals in an area solely for vacation purposes shall not be considered residents.

362.110: Reporting Residency

The application contains spaces for both a physical address and a mailing address. If the two are different, the worker should request both addresses be given. A mailing address only, such as post office box or a rural route, will not be sufficient as it does not indicate that the household resides in the area covered by the certification office. If the address is a rural route, information should be given to identify the exact location of the home.

362.120: Verification of Residency

Verification of residency shall be necessary prior to certification only when the information on the application is inconsistent with statements made by the applicant, previous applications, or with other information known to the worker and whenever a collateral contact must be made for expedited service. Documents with the household's address shall be the primary source of verification, although collateral contacts and/or home visits may be used if documentary evidence cannot be obtained. The worker shall not limit verifications to a single document and must assist the household in obtaining verification, when necessary, as discussed in Section 361.650.

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362.200: Citizenship and Permanent Alien Status

To be eligible for food stamp benefits an individual must be either:

(A) a citizen of the United States; or

(B) an alien lawfully admitted for permanent residence or otherwise permanently residing in the United States as described in the following sections. The presence in a household of a member who does not meet the above criteria shall not prevent the remainder of the household from applying for and, if eligible, receiving benefits. The policy for handling households with ineligible aliens is found in 106 CMR 365.510.

362.210: U.S. Citizenship

For the purpose of qualifying as a United States citizen, the United States is defined as the 50 states, and District of Columbia, Puerto Rico, Guam, and the Virgin Islands. In addition, Nationals from American Samoa or Swain's Island shall be regarded as United States citizens for food stamp purposes.

(A) Verification of Citizenship. Citizenship shall be verified only when the information on the application is inconsistent with statements made by the applicant, other information on the application or with previous applications or other information known to the worker. For example, verification would be required when a household presented an apparently counterfeit social security card, or when an employment office report states that an individual was denied a job due to lack of U.S. citizenship.

(B) Acceptable Forms of Verification. Acceptable forms of verification include birth certificates, religious records, voter registration cards, certificates of citizenship or naturalization provided by INS, such as identification cards for use of resident citizens in the United States (INS Form I-179 or INS Form I-197) or U.S. passports. Participation in the AFDC program shall also be considered acceptable verification if verification of citizenship was obtained for that program. If the above forms of verification cannot be obtained and the household can provide a reasonable explanation as to why verification is not available, the worker shall accept a signed statement from someone who is a U.S. citizen which declares, under penalty of perjury, that the household member in question is a U.S. citizen. The signed statement shall contain a warning of the penalties for helping someone commit fraud, such as: If you intentionally give

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false information to help this person get food stamps, you may be fined, imprisoned, or both.

(C) Participation Pending Verification of U.S. Citizenship. Benefits to households that meet all other eligibility criteria shall not be delayed for lack of verification of citizenship. The member whose citizenship is in question shall be allowed to participate for two months pending verification, providing efforts are being made to obtain the necessary verification. If verification has not been obtained within the two months, the member whose citizenship is in question shall be an ineligible non-household member whose income and resources are not considered available to any remaining household members. (See 106 CMR 365.510)

362.220: Aliens

The alien status of household members listed on the application as aliens shall be determined prior to certification. In determining alien status, the worker shall not contact the Immigration and Naturalization Service (INS) without the express written consent of the alien. INS documentation shall be the primary source of documentation.

362.230: Eligible Aliens

Individuals in the following classifications are permanent aliens eligible for food stamp benefits when a food stamp applicant states on the application that s/he is an alien, this information must be verified. The appropriate verification for each classification is also included.

(A) Immigrants.

(1) Definition - These individuals are aliens lawfully admitted for permanent residence as an immigrant under section 101 (a) (15) and 101 (a) (20) of the Immigration and Nationality Act.

(2) Verification - Acceptable proof of immigration status for these individuals is Immigration and Naturalization Service (INS) Form I-151 or I-551, "Alien Registration Receipt Card " or the "Reentry Permit," a passport booklet for lawful permanent resident aliens.

(B) Permanent Residents Under Color of Law - Continuous Residence.

(1) Definition - These individuals are aliens who: entered the United States prior to June 30, 1948, or some later date as required by law; and have continuously maintained residency in the

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United States since then; and are not ineligible for citizenship, but are considered to be lawfully admitted for permanent residence at the discretion of the Attorney General under section 249 of the Immigration and Nationality Act.

(2) Verification - Acceptable proof of verification for these individuals is Immigration and Naturalization Service (INS) Form I-151 or I-551, "Alien Registration Receipt Card" or the "Reentry Permit," a passport booklet for lawfully permanent resident aliens.

(C) Permanent Residents Under Color of Law - Other Than Continuous Residence.

(1) Definition - These individuals are aliens for whom indefinite deportation has been withheld by the Attorney General under Section 243 of the Immigration and Naturalization Act. Because of the judgment of the Attorney General that the alien would otherwise be subject to persecution on account of race, religion or political opinion. They are considered permanently residing in the United States under color of law. Included among these aliens are Cuban refugees who did not enter at a designated port of entry and were not legally paroled into this country. These and other aliens, although found deportable, may be granted "voluntary departure" for an indefinite period or indefinite stays of deportation because of humanitarian considerations or because of technical difficulties which cannot be overcome and which prevent the Immigration and Naturalization Service (INS) from deporting them.

(2) Verification - Acceptable proof of verification is INS Form I-94 "Arrival-Departure Record" annotated with section 203 (a) (7), section 212 (d) (5) or section 243 (h) of the Immigration and Naturalization Act. The form is also acceptable if it is annotated with one of the following terms or a combination of the following terms: refugee, parolee, paroled, conditional entry or entrant, or asylum.

(D) Refugees.

(1) Definition - These individuals are aliens who qualified for conditional entry because of persecution, or fear of persecution, on account of race, religion, or political opinion or because of being uprooted by a catastrophic natural calamity under section 203 (a) (7) of the Immigration and Naturalization Act.

(2) Verification - Acceptable verification of this eligible alien

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status is possession of INS FORM I-94, "Arrival-Departure Record," annotated with one of the sections or terms given in (C) (2) of this section.

(E) Parolees.

(1) Definition - These individuals are aliens lawfully present in the United States at the discretion of the Attorney General for emergent reasons or reasons deemed in the public interest under section 212 (D) (5) of the Immigration and Naturalization Act. A majority of the Vietnamese and Cuban refugees were admitted under this statute.

(2) Verification - Verification of this eligible alien status is possession of INS Form I-94 "Parolee Edition," "Arrival-Departure Record." This form shall be acceptable verification only if it is annotated with one of the sections or terms given in (C) (2).

(F) American Indians Born in Canada.

(1) Definition - These individuals are lawfully present in the United States under the Immigration and Naturalization Act of 1952. Any person born in Canada, with **at least 50 per centum** of Indian blood, and who has maintained residency in the United States since his/her entry, shall be regarded as having been lawfully admitted for permanent residence.

(2) Verification - Verification of this status is by possession of a "band card" issued by the band council of a Canadian Indian reserve, or a provincial Union of Indians card (such as a Union of Nova Scotia Indians card), or by birth or baptism records, or by an affidavit from a tribal official. These individuals shall not be required to obtain any certification of citizenship or naturalization, or other documentation provided by the Immigration and Naturalization Service, as a condition of eligibility for food stamps.

362.240: Ineligible Aliens

No aliens other than those described in section 362.230 shall be eligible to participate in the program as a household or a member of any household. Among those excluded are: alien visitors, tourists, diplomats, and students who enter the United States temporarily with no intention of abandoning their residence in a foreign country. Aliens unable to furnish **acceptable verification** are ineligible.

362.250: Documentation of Ineligibility

An INS Form I-94 annotated with the letters (A) through (L) shall be considered verification of ineligible alien status unless the alien can provide other documentation from INS which indicates that the alien is eligible.

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362.260: Responsibility for Obtaining Acceptable Verification

(A) Incomplete Verification. If INS Form I-94 does not bear any of the acceptable annotations as provided in section 230 and the alien has no other verification of alien classification, s/he shall be advised that:

- (1) s/he may be eligible if acceptable verification is obtained;
- (2) classification under section 203 (a) (7), 212 (d) (5) or 243 (h) of the Immigration and Naturalization Act shall result in eligible status; and
- (3) s/he may contact INS or otherwise obtain the necessary verification, or, if s/he wishes and signs a written consent, the worker will contact INS to obtain clarification of the alien's status.

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(B) Absence of Documentation. If an alien, other than a Canadian-born American Indian, is unable to provide any INS document at all (not even an INS Form I-94) the worker has no responsibility to offer to contact INS on the alien's behalf. The worker's responsibility exists only when the alien has an INS document that does not clearly indicate eligible or ineligible alien status. In any event, the worker shall not contact INS to obtain information on the alien's correct status without the alien's written consent. If the proper INS documentation is not available, the alien may state the reason and submit other conclusive verification. The worker shall accept other forms of documentation or corroboration from INS that the alien is classified pursuant to sections 101 (a) (15), 101 (a) (20), 203 (a) (7), 212(d) (5), 243 or 249 of the Immigration and Naturalization Act, or other conclusive evidence such as a court order stating that deportation has been withheld pursuant to section 243 (h) of the Immigration and Naturalization Act.

362.270: Certification of Remaining Household Members

While awaiting acceptable verification, the member whose alien status is questionable shall be an ineligible non-household member whose income and resources are not considered available to any remaining household members, (see 106 CMR 365.510). Should acceptable verification subsequently be received, the worker shall act on the information as a reported change in household membership in accordance with the timeliness standard set forth in 106 CMR 366.120.

362.300: Work Registration

The Food Stamp Act requires every household member, unless specifically exempted in this section, to register for work and to comply with all work registration requirements. The worker shall determine which household members are required to register for work. Compliance with work registration requirements is a prerequisite to certification and cannot be waived. Benefits may not be granted conditionally prior to registration of any household members who are required to register.

362.310: Frequency of Registration

Household members who are required to register must do so at initial certification, six (6) months after initial certification and whenever the worker determines a household member must register because of a change in employment status.

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362.320: Method of Registration

The worker shall provide the work registration Form (ES511 or ES511C) to each household member who is required to register for work. A household member is registered when a completed work registration form is returned to the worker. The form shall be submitted to the DES (Division of Employment Security) office serving the area in which the registrant resides. A copy of the form is retained in the case record.

362.330: Exemptions From the Work Registration Requirement

The following individuals listed below are exempt from the work registration requirement. In general exemptions shall be verified only if questionable or inconsistent with other known information. Verification that may be necessary for a particular exemption is noted under that exemption.

(A) Persons Exempt by Age. A person younger than 18 years of age or a person 60 years of age or older is exempt. If a child has its 18th birthday within a certification period, the child shall fulfill the work registration requirement at the next scheduled recertification, unless the child qualifies for another exemption.

(B) Persons Physically or Mentally Unfit. Persons who are physically or mentally incapable of gainful employment, either permanently or temporarily, are exempt. Persons claiming a temporary disability shall be required to register once they become physically or mentally fit for employment. When the disability is not evident, individuals claiming this exemption shall, furnish verification to document their disability claim. Appropriate verification consists of receipt of temporary or permanent disability benefits from a governmental or private source, such as OASDI, or a statement from a physician or psychologist. Documentation should appear in the case file to support the granting of this exemption.

(C) WIN Participants. An AFDC recipient subject to and participating in the Work Incentive Program (WIN) is exempt. Registration for participation in WIN by signing the WIN Referral and Registration Form shall be considered equivalent to registration for work under the food stamp work requirement. A recipient registered for WIN who subsequently fails to comply with the requirements of the WIN program shall not be denied food stamp benefits solely for this failure. The recipient would in this case lose his/her exemption from the food stamp work registration

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requirement and must register for work unless s/he qualifies for another exemption.

(D) Caretakers.

(1) A parent or other household member who is responsible for the care of a dependent child under 12 or an incapacitated household member is exempt. If the child has its 12th birthday within a certification period, the individual responsible for care of the child shall fulfill the work registration requirement at the next scheduled recertification, unless the individual qualifies for another exemption.

(2) In a household where another able-bodied parent is registered for work, or exempt as a result of employment, a parent or caretaker of a child under 18 is exempt from work registration. If the child has its 18th birthday within a certification period, the parent or caretaker must fulfill the work registration requirement at the next scheduled recertification, unless the parent or caretaker qualifies for another exemption.

(3) If a parent and another member of the household both claim to be responsible for the care of the same dependent child or incapacitated adult, the actual responsibility shall be determined by discussion with the applicant.

(E) Persons Receiving Unemployment Compensation. Persons receiving Unemployment Compensation benefits are exempt from work registration. A person who has applied for, but has not yet begun to receive, Unemployment Compensation shall also be exempt but only if that person was required to register for work with the Division of Employment Security (DES) as part of the Unemployment Compensation application process. An individual who fails to comply with the work registration requirements for Unemployment Compensation is not automatically ineligible for food stamps, but loses their exemption under this section. In order to remain eligible s/he must register for work unless s/he qualifies for another exemption.

(F) Addicts and Alcoholics. A regular participant, either on a resident or non-resident basis, in a drug addiction or alcoholic treatment and rehabilitation program is exempt from work registration. Participation, if questionable, may be verified through the organization or institution operating the program.

(G) Employed Persons. Persons who are employed or self-employed and working a minimum of 30 hours weekly or receiving earnings equal to the Federal minimum wage multiplied by 30 hours are exempt from work registration. Below are the guidelines to follow when determining an

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applicant or recipient's eligibility for this exemption.

(1) Verification of earned income, as required for certification, is sufficient to establish this exemption provided the amount of income appears to be consistent with a conclusion of employment for 30 hours a week.

(2) If the income of the employed individual does not meet the preceding test but s/he still claims to be employed, then the applicant shall be requested to supply documentary evidence of the existence of an employee-employer relationship and that the number of hours worked is equivalent to thirty hours a week.

Factors that may be considered, while not all inclusive, are the following.

a. Does the wage meet State, local and Federal minimums?

b. Have deductions for required mandatory amounts for Federal and/or State income taxes, Social Security tax, etc., been made by the employer?

c. Does the employer pay unemployment insurance premiums on behalf of the employee?

(3) If a self-employed person's income does not meet this test, s/he must establish that the income received from the self-employment enterprise is at least sufficient to be considered gainful employment and that the volume of work claimed justifies a determination that the self-employment enterprise is a full time job for the purpose of this exemption.

(4) Persons engaged in hobbies or any other activity which cannot, because of the minimal amount of monies received from such activity, be considered as gainful employment, shall not be considered exempt from work registration regardless of the time spent in such activity.

(H) Students. Students enrolled at least half time in any recognized school, training program, or institution of higher education who have met the eligibility requirements of section 362.410. Persons who are not enrolled at least half time or who experience a break in their enrollment status due to graduation, expulsion, suspension, or who drop out or otherwise do not intend to return to school shall not be considered students for the purpose of qualifying for this exemption.

(I) SSI Applicants. Household members applying for SSI and for food stamps under the provisions of Section 361.190 shall have the work registration requirement waived until:

(1) They are determined eligible for SSI and thereby become exempt from work registration; or

(2) They are determined ineligible for SSI. A determination of their work registration status shall be made in accordance with Section 362.310.

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362.335: Voluntary Quit Provision for Applicant Households

When the primary wage earner is unemployed and required to register for work and is found to have quit his or her most recent employment within the last sixty (60) days without good cause, the entire household shall be disqualified from participation for a period of two months beginning with the month of the voluntary quit.

(A) Definitions. As used in this section, the following terms are defined.

(1) Primary Wage Earner. The household member, age eighteen (18) or over, who was acquiring the greatest amount of earned financial support for the household at the time of the quit.

(2) Unemployed. Employed less than twenty (20) hours per week or receiving less than weekly earnings equivalent to the Federal minimum wage multiplied by twenty (20) hours.

NOTE: This twenty (20) hour requirement is different from that used to determine full-time employment for exemption from work registration (see section 330 (G)).

(3) Good Cause. Good cause includes circumstances beyond the primary wage earner's control such as, but not limited to, illness, illness of another household member sufficiently serious to require the presence of the primary wage earner, unavailability of transportation, household emergency or a job that does not meet the suitability criteria in section 350. Good cause for leaving employment also includes:

a. Discrimination by an employer for reasons of age, race, sex, color, handicap, religious beliefs, national origin or political beliefs.

b. Work demands or conditions that render continued employment unreasonable, such as working without being paid on schedule.

c. Acceptance of employment by the primary wage earner or enrollment at least half-time in any recognized school, training program or institution of higher education that requires the primary wage earner to leave employment.

d. Acceptance of employment by any other household member or enrollment at least half-time in any recognized school, training program or institution of higher education located in another county requiring the household to move and the primary wage earner to leave employment.

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- e. Resignations by persons under the age of sixty (60) when the resignation is recognized by the employer as retirement.
- f. Employment which becomes unsuitable after acceptance of such employment (see section 350).
- g. Acceptance by the primary wage earner of a bona fide offer of employment of more than twenty (20) hours per week or in which the weekly earnings are equivalent to the Federal minimum wage multiplied by twenty (20) hours when, because of circumstances beyond the primary wage earner's control, the employment subsequently either does not materialize or results in employment of less than twenty (20) hours per week or weekly earnings of less than the Federal minimum wage multiplied by twenty (20) hours.
- h. The leaving of employment by the primary wage earner in connection with patterns of employment in which workers frequently move from one employer to another such as migrant farm labor or construction work. There may be some circumstances where households will apply for food stamp benefits between jobs particularly in cases where work may not yet be available at the new job site. Even though employment at the new site has not actually begun, the quitting of the previous employment shall be considered as with good cause if it is part of the pattern of that type of employment.

(B) Changes in Employment That Are Not Considered A Voluntary Quit.

- (1) Reducing hours of employment while working for the same employer.
- (2) Termination of a self-employment enterprise.
- (3) Resigning from a job at the demand of the employer.

(C) Exemptions From the Voluntary Quit Provision.

- (1) Primary wage earners in households certified for participation in the Food Stamp Program at the time of the quit.
- (2) Persons exempt from full-time work registration.

(D) Verification of Voluntary Quit. The worker shall request verification of the household's statements only when information given by the household is questionable, that is, inconsistent with information on the application or previous applications or with information known to the worker. The primary responsibility for providing verification rests with the household. However, if it is difficult or impossible for the household to obtain documentary evidence in a timely manner, the worker shall offer assistance to the household to obtain the needed verification.

- (1) Sources of Verification. Acceptable sources of verification include, but are not limited to, the previous employer, employee associations, union representatives and grievance committees or

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organizations. Whenever documentary evidence cannot be obtained, the worker shall substitute a collateral contact. If the collateral contact designated by the household cannot be expected to provide accurate third party verification, the worker shall ask the household to designate another collateral contact and document in the case record why the original collateral contact was unacceptable.

(2) Inability to Obtain Verification. No household shall be denied participation in the Food Stamp Program when the household and the worker are unable to obtain verification from the sources in (1) above or from other sources because the reason for the quit cannot be verified. Such reasons include, but are not limited to, resignation due to discrimination practices or unreasonable demands by an employer or because the employer cannot be located.

(E) Application Processing. When a worker makes a determination of voluntary quit, the household's application shall be denied and the household shall remain ineligible to participate in the Food Stamp Program for a period of two months beginning with the month of the voluntary quit. The household shall be informed of the reason for the denial, its right to re-apply and its right to file for a fair hearing.

If a household reapplies in the second month of disqualification, the worker shall use the same application to deny benefits for the remaining month of the disqualification and to certify the household for subsequent month(s) if all other eligibility criteria are met by the household (see 106 CMR 364.110 (A)).

362.340: Additional Requirements for Work Registration

Each household member required to register for employment is also required to comply with the following:

(A) Report for an interview to the appropriate DES office upon reasonable request.

(B) Respond to a request from the DES office for supplemental information regarding employment status or availability for work.

(C) Report to an employer when referred by the DES office if the potential employment meets the suitability requirements in section 350.

(D) Accept a bonafide offer of suitable employment as described in section 350 when referred by the DES office.

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(E) Continue suitable employment found by the DES office. Registrants shall continue this employment until it is no longer considered suitable in accordance with section 350, or they are terminated for reasons beyond their control, or they become exempt from work registration under the provisions in section 320.

362.350: Suitable Work

Employment which meets the criteria below shall be considered suitable employment under the work registration requirement.

(A) Minimum Wage

- (1) The wage offered is at least the highest of:
 - a. the applicable Federal minimum wage;
 - b. the applicable State minimum wage; or
 - c. eighty percent (80%) of the Federal minimum wage, if neither the Federal nor the State minimum wage is applicable to the job.
- (2) The employment offered is on a piece rate basis, and the average hourly yield the employee can reasonably expect to earn at least equals the applicable hourly wages specified under (1) above.

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(B) Labor Organizations. The registrant, in order to be hired or to continue working, is not required to join, resign from, or refrain from joining any legitimate labor organization.

(C) Strikes. The work offered is not at a site subject to a strike or lockout at the time of the offer unless the strike has been enjoined under section 208 of the Labor-Management Relations Act (Taft-Hartley), or unless an injunction has been issued under section 10 of the Railway Labor Act.

(D) Other Suitable Employment. Employment is also considered suitable unless the registrant can demonstrate or the worker determines that:

- (1) The risk of health and safety is unreasonable.
- (2) The registrant is physically or mentally unfit to perform the employment, as documented by medical evidence or by reliable information from other sources.
- (3) The employment offered within the first 30 days of registration is not in the registrant's major field of experience.
- (4) The distance from the registrant's home to the place of employment is unreasonable based on the expected wage and the time and cost of commuting. Daily commuting time shall not exceed two hours per day, not including the transportation of a child to and from a child care facility. Nor shall employment be considered suitable if the distance to the place of employment prohibits walking, and both public and private transportation are unavailable for use in getting to the job site.
- (5) The working hours of nature of the employment interferes with the member's religious observances, convictions, or beliefs.

362.360: Results of Failure to Comply

(A) Household Eligibility. If the worker determines that a household member has refused or failed without a good cause (as defined in section 362.370) to comply with the work registration requirements the household is ineligible to participate. The household remains ineligible until the member complies with the requirements of section 362.380, or becomes exempt, or the 2 month disqualification period ends, whichever occurs earlier.

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(B) Disqualification Process. Within ten (10) days after the date DES provides the worker with notification of a registrant's failure to comply, the worker shall determine if the registrant had good cause for failing to comply, as defined in section 370. If s/he did not, the worker shall provide the household with a Notice of Adverse Action. The disqualification shall begin with the first month following the expiration of the adverse notice period, unless a fair hearing is requested. If a fair hearing is scheduled the Department shall provide DES sufficient advance notice to permit the attendance of a DES office representative, if such attendance is necessary. Each household has a right to a fair hearing to contest a determination of non-exempt status or a denial, reduction or termination of benefits due to failure to comply with the work registration requirements.

362.370: Good Cause for Failure to Comply

To determine if good cause exists for failure to comply with registration requirements, the worker shall consider all facts and circumstances, including information submitted by the DES office, the registrant and the employer. Good cause includes circumstances beyond the member's control, such as, but not limited to, illness, illness of another household member sufficiently serious to require the presence of the registrant, unavailability of transportation, or household emergency.

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362.380: Reestablishing Eligibility

Following the end of the 2 month disqualification period, the household may apply again to establish eligibility. Eligibility may be established or reestablished within a disqualification period if the household is otherwise eligible and the member becomes exempt from the work registration requirement or the member complies as follows.

(A) If disqualification was due to refusal to register, the household member must complete the work registration form.

(B) If disqualification was due to refusal to report for an interview at the DES office, the registrant must report for the interview.

(C) If disqualification was due to refusal to respond to a request from the DES office for supplemental information regarding employment status or availability for work, the registrant must respond to the DES office.

(D) If disqualification was due to refusal to report to an employer when referred by the DES office, the registrant must report to the same employer or another employer when referred.

(E) If disqualification was due to refusal to accept a bona fide offer of suitable employment when referred by DES, the registrant must accept this employment or other employment with equivalent earnings; or any other employment of at least 30 hours per week or if less than 30 hours per week, with weekly earnings equal to the Federal minimum wage multiplied by 30 hours.

(F) If disqualification was due to refusal to continue suitable employment when referred by DES, the registrant must return to this employment, or accept other employment with equivalent earnings or any other employment of at least 30 hours per week or if less than 30 hours per week with weekly earnings equal to the Federal minimum wage multiplied by 30 hours.

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Any person between the ages of 18 and 60 who is enrolled at least half time in an institution of higher education shall be ineligible to participate in the Food Stamp Program unless s/he meets one of the requirements of section 362.410. This section does not apply to persons who are physically or mentally incapable of gainful employment, persons attending high school, persons participating in on-the-job training programs, or to persons enrolled full time in schools and training programs which are not institutions of higher education.

An institution of higher education is any institution or program which is recognized by a Federal, State, or local government agency and provides post high school education. This includes, but is not limited to, colleges, universities, and technical schools.

Persons who claim exemption from this section because of physical or mental disability must provide verification when the disability is not evident. Appropriate verification consists of receipt of temporary or permanent disability benefits from a governmental or private source, such as OASDI, or a statement from a physician or psychologist.

362.410: Eligibility

In order to be eligible to participate in the Food Stamp Program any student, as defined in section 362.400, must meet at least one of the following criteria.

- (1) Be employed at least 20 hours per week;
- (2) Participate in a federally funded work study program during the regular school year;
- (3) Be the head of a household (or the spouse of the head of a household) containing one or more other persons who are dependents of that individual because he or she supplies more than half of their support, as defined in section 362.430; or
- (4) Be enrolled in an institution of higher education as the result of participation in the Work Incentive Program.

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362.420: Continuous Enrollment

Once a student enrolls in an institution of higher education, such enrollment continues through normal periods of class attendance, vacation and recess unless the student graduates, is suspended or expelled, drops out, or does not intend to register for the next normal school term (excluding summer school).

Enrollment as the result of participation in the Work Incentive Program shall be deemed to continue as long as the student maintains continuous enrollment as specified in this section.

362.430: Support

In determining whether a head of household furnishes more than half of the support of a dependent, the following general principles apply.

(A) The head of household must furnish over half of the dependent's total support during the calendar year. Total support is the sum of the fair rental value of lodging furnished; all expenses paid or incurred directly by or for the dependent, such as clothing and medical expenses; and a proportionate share of expenses that cannot be attributed directly to a particular individual, such as the cost of food for the entire household. Total support includes expenditures for providing food, shelter, clothing, education, medical and dental care, recreation, transportation, and similar necessities.

(B) The person providing the support is the person to be evaluated for head of household status. Need-based Federal or State assistance payments on behalf of a household member are considered as being provided by the person receiving such payments. For example, a mother with a 5 year old child qualifies for the head of household exemption even if the primary source of income is AFDC.

(C) The person claimed as a dependent must be a member of the same food stamp household.

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intends to claim the student as a tax dependent for the current year.

(2) Over half of the support of the student shall be treated as received from the taxpayer if:

- a. no one other person contributed over half of such support; or
- b. less than half of such support was received from persons each of whom, but for the fact that s/he did not contribute over half of such support, would have been entitled to claim the student as a dependent for a taxable year; or
- c. the Internal Revenue Service recognizes the taxpayer as providing over half the students support.

(C) Eligibility of Taxpayer Households. Based on information provided by the student or the taxpayer, if the taxpayer's household is not currently certified for food stamps, its eligibility shall be determined by the household's size and gross monthly income according to table 1. Self-employed households shall have their gross income determined on an annual basis rather than a monthly basis. For self-employed households gross income will be income minus the cost of doing business, but not including taxes.

362.430: Household Eligibility Pending Verification

While awaiting student tax dependency verification from the parent taxpayer(s), the remaining household members shall be certified based on a household size that excludes the student. The student shall be treated as an ineligible non-household member. The student's income and resources are not considered in determining eligibility or the coupon allotment for the remaining household members.

362.440: Effects of Verification

If the remaining members of a student's household have been certified while the student is awaiting tax dependency verification, the result of the verification can affect the participation of the household in two ways;

(A) If the verification shows the student to be an ineligible tax dependent, the participating household will continue to participate on the same basis on which it was certified.

(B) If the verification shows the student to be eligible to participate, the worker shall act on this information as a reported change in the household's membership (see 106 CMR 366.120 (A)).

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362.450: Responsibility for Reporting Changes

The student is responsible for reporting changes in the parent's or guardian's circumstances, as well as his/her own, which would have an impact on his his/her eligibility under the tax dependency criteria.

362.460: Basis for Denying Eligibility

Grounds for denying student eligibility are as follows.

- (A) Parent's failure to supply requested information.
- (B) The parent's response which indicates student ineligibility.
- (C) The student's failure to cooperate if he/she does not provide correct and complete answers to the tax dependency questions, including the name and address of his/her parent or guardian.

When a parent fails to supply requested information or a parent's response indicates student ineligibility, the student shall have an opportunity to demonstrate that s/he should not be declared ineligible either through an informal appeal to the worker or through a Fair Hearing. The student may prove that he is not or could not be properly claimed as a tax dependent by demonstrating that the parent or guardian is not providing, and does not intend to provide, over half of his support.

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362.470 TABLE 1: MAXIMUM MONTHLY GROSS INCOME FOR TAXPAYER HOUSEHOLDS

<u>HOUSEHOLD SIZE</u>	<u>MAXIMUM MONTHLY GROSS INCOME</u>
1	\$ 582
2	703
3	825
4	945
5	1066
6	1187
7	1307
8	1428
9	1550
10	1671
11	1792
12	1913
13	2035
14	2156
15	2277
16	2398
17	2520
18	2641
19	2762
20	2883

362.500: Social Security Numbers

A household participating or applying for participation in the Food Stamp Program must provide a Social Security number for all household members 18 years of age and older, and for any member under 18 who has countable income. If an individual has more than one number, all numbers must be provided. Refusal to provide a valid Social Security number will result in disqualification of the individual for whom a number is not obtained or verified.

362.510: Obtaining a Social Security Number

A household member who is required to provide a Social Security number but is unable to do so must apply for a number. The individual shall be allowed the option of applying directly to the Social Security Administration for the number, or being referred by the worker by means of a Department referral form. The worker shall inform the household where to apply for a number and what information is required by the Social Security Administration to process an application for a number.

(A) Worker Referred. The worker shall complete referral form ENUM-2. The worker shall suggest that the individual ask for proof of application from the Social Security Administration, in case the application is not processed within the 90 days specified in Section 362.530. The completed ENUM-2 signed by a Social Security Administration employee shall be accepted as proof of application.

(B) Direct Application. The individual may apply directly to the Social Security Administration without a Department referral form. The worker shall suggest that the individual ask for proof of application from the Social Security Administration in case the application is not processed within the 90 days specified in Section 362.530. If the individual applying for a Social Security number is unable to obtain the documents required by the Social Security Administration to be submitted with the application for a number, the worker shall make every effort to assist the individual in obtaining these documents.

362.520: Verification of Social Security Numbers

Social Security numbers provided by the household must be verified. However, certification will not be delayed solely for the purpose of validating any member's Social Security number. As soon as all other steps necessary to certify a household are completed, except for verification of a Social Security number, the worker shall certify the household. If verification is not completed at the initial certification, it shall be completed at the time of or prior to the next recertification.

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The worker shall verify the Social Security numbers by observing the member's Social Security card or an official document bearing the member's Social Security number. Acceptable documents are an employee's W-2 form, pay stubs, Social Security checks, SDX documents, or any correspondence from the Social Security Administration that includes the member's Social Security number.

A social Security number that has been verified for another department program such as AFDC or Medicaid shall be accepted as verified for the Food Stamp Program. A verified Social Security number shall be reverified only if the identity of the individual or the Social Security number becomes questionable.

362.530: Participation Pending Receipt of Number

If any household member required to provide a Social Security number is unable to do so prior to certification or recertification that member must apply for a number and shall be allowed to participate for 90 days from the date of the eligibility determination while awaiting receipt of his/her number.

If the Social Security number has not been obtained within 90 days from the date of the eligibility determination and the household member can show good cause why it has not been obtained, the member shall be disqualified. If the number has not been obtained but the household member can show good cause (as defined in 362.540) the member may continue to participate if s/he has documentation indicating an application for a Social Security number has been made.

362.540: Good Cause for Failure to Comply

To determine if good cause exists for failure to comply with the requirement to provide a Social Security number, the worker shall consider all facts and circumstances including information submitted by the household member and by the Social Security Administration. Good cause shall include documentary evidence or collateral information that the household member has applied for a number or has made every effort to supply the Social Security Administration with the information necessary to obtain a number.

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363.160: Vehicles as a Resource

Unlicensed vehicles not specifically exempted in Section 363.150(D) shall be counted at equity value. Licensed vehicles not specifically exempted in (A) below may have either the amount of fair market value in excess of \$4500 or the equity value counted as a resource. In some cases a licensed vehicle will have to be evaluated for both fair market value and equity value. In these case the larger of the fair market value in excess of \$4500 or the equity value will be counted against the household's resource limit. In no case shall both fair market in excess of \$4500 and equity value be counted for the same vehicle.

(A) Totally Exempt Licensed Vehicles. The entire value of a licensed vehicle shall be exempt if the vehicle fits one of the descriptions below. This exemption continues to apply when the vehicle is not in use because of temporary unemployment; for example, when a taxi driver is ill and cannot work or when a fishing boat is frozen in the harbor.

(1) The licensed vehicle is used primarily (over 50% of the time) for income providing purposes; for example, a taxi, truck, or fishing boat.

(2) The licensed vehicle is annually producing income consistent with its fair market value, even if used only on a seasonal basis.

(3) The licensed vehicle is necessary for long distance travel essential to the employment of a household member; for example, the car used by a traveling salesperson or migrant farmworker. This exclusion does not apply to vehicles used for daily commuting to employment.

(4) The licensed vehicle is necessary for subsistence hunting or fishing.

(5) The licensed vehicle is used as a household's home.

(6) The licensed vehicle is used to transport a physically disabled household member, regardless of the purpose of such transportation. The vehicle need not have special equipment or be used primarily by the physically disabled household member. Each physically disabled member of a household is entitled to have one vehicle so excluded.

(B) Fair Market Value of Licensed Vehicles. The worker shall determine the fair market value in excess of \$4500 for all licensed vehicles not exempt in accordance with (A) above. The amount of fair market value in excess of \$4500 shall be determined without regard to any encumbrances that may be on the vehicle. In no case shall the values of two or more vehicles be added together to reach a total fair market value in excess of \$4500.

The fair market value of licensed automobiles, trucks, and vans, will be the "wholesale value" of those vehicles as listed in the "blue book". The "blue book" used to determine this value shall not be more than six months old.

CHAPTER 363

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363.050: Introduction

A food stamp household must meet both income and resource eligibility criteria in order to participate in the Food Stamp Program. This chapter describes what is included and excluded as resources and income when determining a household's eligibility for the Food Stamp Program.

363.100: Resources

All liquid and non-liquid resources except those specifically exempted in sections 363.150 and 363.160 shall be counted when determining a household's eligibility.

363.110: Definition of Resources

Resources are all liquid and non-liquid assets owned by a household.

(A) Liquid assets include cash on hand, money in checking or savings accounts, savings certificates, stocks, bonds, lump sum payments as specified in Section 363.170 (B) and other property easily converted to cash.

(B) Non-liquid assets are land, buildings, licensed and unlicensed vehicles, personal property, recreational property and any other property not readily accessible or convertible to cash. Non-liquid assets, except for certain licensed vehicles, are counted at equity value. Equity value is the fair market value less encumbrances.

363.120: Resource Eligibility Limits

Eligibility shall be denied or terminated if the value of non-exempt resources, both liquid and non-liquid assets owned by the household exceeds:

(A) \$3,000 for all households with 2 or more members if at least one member is 60 or over, or

(B) \$1,500 for all other households including all one person households.

363.130: Application of Resource Limits

(A) The resource eligibility standards shall be applied to both PA and NPA households.

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(B) At the time of application, the household shall report all non-exempt resources and all resources anticipated to be received in the certification period.

(C) For applicant households, the resources owned at the time the application is filed shall be used to determine if the household's resources meet the eligibility standard.

363.140: Verification of Resources

(A) All resources must be identified on the application in sufficient detail to permit verification.

(B) All liquid resources shall be verified. In addition to verifications provided by the household, the Department shall verify the existence and amount of bank accounts by requesting information from banks.

(C) Other resources shall be verified when questionable. That is when the information given by the household is inconsistent with statements made by the applicant, other information on the application or previous applications, or with information known to the worker. Documentary evidence is the primary source of verification. Collateral contacts may be used if documentary evidence is unavailable.

363.150: Exempt Resources

Only the following resources will be exempt when determining household eligibility.

(A) Home and Lot. The home and surrounding property which is not separated from the home by intervening property owned by others is exempt.

(1) Property separated from the home by a public right of way, such as a road, is exempt.

(2) The home and surrounding property shall remain exempt when temporarily unoccupied for reasons of employment, training for employment, illness, vacation, or destruction caused by casualty or natural disaster, provided the household intends to return.

(3) If the household does not already own a home, the value of a lot purchased to build a home is exempt. If the new home is partially completed, the value of the partially completed home is also exempt.

(B) Household and Personal Goods, Life Insurance and Pension Funds. Household goods and personal affects, including one burial lot per household member are exempt resources. The cash value of life insurance policies and pension funds are exempt resources as long as the funds remain in the pension plan. Pension funds include those plans with interest penalties for early withdrawals such as a Keogh

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(B) At the time of application, the household shall report all nonexempt resources and all resources anticipated to be received in the certification period.

(C) For applicant households, the resources owned at the time the application is filed shall be used to determine if the household's resources meet the eligibility standard.

363.140: Verficiation of Resources

(A) All resources must be identified on the application in sufficient detail to permit verification.

(B) Resources shall be verified when questionable. That is when the information given by the household is inconsistent with statements made by the applicant, other information on the application or previous applications, or with information known to the worker. Documentary evidence is the primary source of verification. Collateral contacts may be used if documentary evidence is unavailable.

363.150: Exempt Resources

Only the following resources will be exempt when determining household eligibility.

(A) Home and Lot. The home and surrounding property which is not separated from the home by intervening property owned by others is exempt.

(1) Property separated from the home by a public right of way, such as a road, is exempt.

(2) The home and surrounding property shall remain exempt when temporarily unoccupied for reasons of employment, training for employment, illness, vacation, or destruction caused by casualty or natural disaster, provided the household intends to return.

(3) If the household does not already own a home, the value of a lot purchased to build a home is exempt. If the new home is partially completed, the value of the partially completed home is also exempt.

(B) Household and Personal Goods, Life Insurance and Pension Funds Household goods and personal affects, including one burial lot per household member are exempt resources. The cash value of life insurance policies and pension funds are exempt resources as long as the funds remain in the pension plan. Pension funds include those plans with interest penalties for early withdrawals such as a Keogh

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Plan or an Individual Retirement Account (IRA)

(C) Exempt Vehicles. Licensed vehicles are exempt as specified in Section 160. Unlicensed vehicles are exempt as specified in D below.

(D) Exempt Income Producing Property. Exempt income producing property is defined in two ways. Property which is exempt because it is essential to employment and property which is exempt because it annually produces income consistent with its fair market value. Property exempt as essential to employment need not be producing income consistent with its fair market value.

(1) Property essential to the employment or self employment of a household member:

- a. work related equipment such as the tools of a tradesman or the machinery of a farmer,
- b. property such as farm land and rental homes (except certain vacation homes specified below.)

(2) Property which annually produces income consistent with its fair market value, even if used only on a seasonal basis. Income will be considered consistent with fair market value if the income produced is as much as the property could reasonably be expected to produce and is comparable with income produced by similar property in the same area.

When it is necessary to determine if property is annually producing income consistent with its fair market value, the worker may contact local realtors, local tax assessors, the Small Business Administration, or other similar sources to determine the prevailing rate of return, for example, square foot rental for similar usage or property in the area. If the worker determines that the property is not annually producing income consistent with its fair market value, for instance, the property is being leased for a token payment, the equity value of the property shall be counted as a resource.

- a. Rental homes which are used by the household for vacation purposes at some time during the year must annually produce income consistent with their fair market value.
- b. Installment contracts for the sale of land or buildings must annually produce income consistent with their fair market value. This exemption shall also apply to the value of property sold under the installment contract or held as security in exchange for a purchase price which is consistent with the fair market value of the property.

(E) Inaccessible Resources. When the cash value of a resource is not accessible to the household, the resource is exempt. These inaccessible resources include, but are not limited to, irrevocable trust funds, security deposits on rental properties or utilities, property in probate, and real property which the household is making a good faith effort to sell at a reasonable price and which has not been sold.

(1) Irrevocable Trust Funds as Inaccessible Resources. Any funds in a trust, or transferred to a trust, and the income produced by that trust shall be considered inaccessible to the household if all the conditions listed below are met by the trust arrangement:

- a. the trust is under the control and management of an institution, corporation or organization (the trustee) which is not under the direction or ownership of any household member; and
- b. that trustee used the funds solely to make investments on behalf of the trust or to pay the educational expenses of any person named by the household creating the trust; and
- c. the trust investments do not directly involve or assist any business or corporation under the control, direction or influence of a household member; and
- d. the trust arrangement will not likely cease during the certification period; and
- e. no household member has the power to revoke the trust arrangement or change the name of the student beneficiary during the certification period.

(2) Jointly Owned Resources as Inaccessible. A resource owned jointly by separate households shall be exempt only if the resource cannot practically be subdivided and the household's access to the value of the resource is dependent on the agreement of a joint owner who refuses to comply (see Section 363.170(A)).

(F) Resources of Non-Household Members. The resources of a non-household member shall be disregarded when determining the eligibility of the remaining household members except when the non-household member has been disqualified from participation in the Food Stamp Program for fraud or for failure to comply with the requirement to provide a valid Social Security number.

(G) Other Exempt Resources.

(1) Earmarked Resources. Any governmental payments which are designated for the restoration of a home damaged in a disaster are exempt if the household is subject to a legal sanction if the funds are not used as intended. For example, payments made by the Department

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(B) At the time of application, the household shall report all non-exempt resources and all resources anticipated to be received in the certification period.

(C) For applicant households, the resources owned at the time the application is filed shall be used to determine if the household's resources meet the eligibility standard.

363.140: Verification of Resources

(A) All resources must be identified on the application in sufficient detail to permit verification.

(B) All liquid resources shall be verified. In addition to verifications provided by the household, the Department shall verify the existence and amount of bank accounts by requesting information from banks.

(C) Other resources shall be verified when questionable. That is when the information given by the household is inconsistent with statements made by the applicant, other information on the application or previous applications, or with information known to the worker. Documentary evidence is the primary source of verification. Collateral contacts may be used if documentary evidence is unavailable.

363.150: Exempt Resources

Only the following resources will be exempt when determining household eligibility.

(A) Home and Lot. The home and surrounding property which is not separated from the home by intervening property owned by others is exempt.

(1) Property separated from the home by a public right of way, such as a road, is exempt.

(2) The home and surrounding property shall remain exempt when temporarily unoccupied for reasons of employment, training for employment, illness, vacation, or destruction caused by casualty or natural disaster, provided the household intends to return.

(3) If the household does not already own a home, the value of a lot purchased to build a home is exempt. If the new home is partially completed, the value of the partially completed home is also exempt.

(B) Household and Personal Goods, Life Insurance and Pension Funds. Household goods and personal affects, including one burial lot per household member are exempt resources. The cash value of life insurance policies and pension funds are exempt resources as long as the funds remain in the pension plan. Pension funds include those plans with interest penalties for early withdrawals such as a Keogh

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(E) Inaccessible Resources. When the cash value of a resource is not accessible to the household, the resource is exempt. These inaccessible resources include, but are not limited to, irrevocable trust funds, security deposits on rental property or utilities, property in probate, and real property which the household is making a good faith effort to sell at a reasonable price and which has not been sold.

(1) Irrevocable Trust Funds as Inaccessible Resources. Any funds in a trust or transferred to a trust, and the income produced by that trust to the extent it is not available to the household, shall be considered inaccessible to the household if all the conditions listed below are met by the trust arrangement:

- a. the trust arrangement is not likely to cease during the certification period and no household member has the power to revoke the trust arrangement or change the name of the beneficiary during the certification period; and
- b. the trustee administering the trust is either (1) a court or an institution, corporation, or organization which is not under the direction or ownership of any household member, or (2) an individual appointed by the court who has court imposed limitations placed on his/her use of the funds; and
- c. trust investments made on behalf of the trust do not directly involve or assist any business or corporation under the control, direction, or influence of a household member; and
- d. the funds held in irrevocable trust are either (1) established from the household's own funds, if the trustee uses the funds solely to make investments on behalf of the trust or to pay the educational or medical expenses of any person named by the household creating the trust, or (2) established from non-household funds by a non-household member.

(2) Jointly Owned Resources as Inaccessible. A resource owned jointly by separate households shall be exempt only if the resource cannot practically be subdivided and the household's access to the value of the resource is dependent on the agreement of a joint owner who refuses to comply (see Section 363.170(A)).

(F) Resources of Non-Household Members. The resources of a non-household member shall be disregarded when determining the eligibility of the remaining household members except when the non-household member has been disqualified from participation in the Food Stamp Program for fraud or for failure to comply with the requirement to provide a valid Social Security number.

(G) Other Exempt Resources

(1) Earmarked Resources. Any governmental payments which are designated for the restoration of a home damaged in a disaster are exempt if the household is subject to a legal sanction if the funds are not used as intended. For example, payments made by the Department

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(2) Exempted funds which are commingled in an account with other funds shall retain their exemption for six months from the date they are commingled, except that the resources of students and self-employment households which are exempted by paragraph (G) (2) of this section shall retain their exemption for the period of time over which they have been prorated as income. Each withdrawal of funds from the commingled account shall reduce the value of the non-exempt funds by the amount of the withdrawal.

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363.160: Vehicles as a Resource

Unlicensed vehicles not specifically exempted in Section 363.140 (D) shall be counted at equity value. Licensed vehicles not specifically exempted in A below may have either the amount of fair market value in excess of \$4500 or the equity value counted as a resource. In some cases a licensed vehicle will have to be evaluated for both fair market value and equity value. In these cases the larger of the fair market value in excess of \$4500 or the equity value will be counted against the household's resource limit. In no case shall both fair market value in excess of \$4500 and equity value be counted for the same vehicle.

(A) Totally Exempt Licensed Vehicles. The entire value of a licensed vehicle shall be exempt if the vehicle fits one of the descriptions below. This exemption continues to apply when the vehicle is not in use because of temporary unemployment; for example, when a taxi driver is ill and cannot work or when a fishing boat is frozen in the harbor.

(1) The licensed vehicle is used primarily (over 50% of the time) for income providing purposes; for example, a taxi, truck, or fishing boat.

(2) The licensed vehicle is annually producing income consistent with its fair market value, even if used only on a seasonal basis.

(3) The licensed vehicle is necessary for long distance travel essential to the employment of a household member; for example, the car used by a traveling salesperson or migrant farmworker. This exclusion does not apply to vehicles used for daily commuting to employment.

(4) The licensed vehicle is necessary for subsistence hunting or fishing.

(5) The licensed vehicle is used as a household's home.

(6) The licensed vehicle is used to transport a physically disabled household member, regardless of the purpose of such transportation. The vehicle need not have special equipment or be used primarily by the physically disabled household member. Each physically disabled member of a household is entitled to have one vehicle so excluded.

(B) Fair Market Value of Licensed Vehicles. The worker shall determine the fair market value in excess of \$4500 for all licensed vehicles not exempt in accordance with A above. The amount of fair market value in excess of \$4500 shall be determined without regard to any encumbrances that may be on the vehicle. In no case shall the values of two or more vehicles be added together to reach a total fair market value in excess of \$4500.

The fair market value of licensed automobiles, trucks, and vans, will be the "wholesale value" of those vehicles as listed in the "blue book". The "blue book" used to determine this value shall not be more than six months old.

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(1) The value of the vehicle shall not be increased by adding the value of optional equipment or low mileage.

(2) A household may indicate that for some reason, such as bodily damage or inoperability, the vehicle is in less than average condition. Any household which claims that the blue book value does not apply to its vehicle shall be given the opportunity to acquire verification of the true value from a reliable source.

(3) Households shall be asked to acquire verification of the value of licensed antique, custom made, or classic vehicles, if the worker is unable to make an accurate appraisal.

(4) If a vehicle is specially equipped with apparatus for the handicapped, this apparatus shall not increase the value of the vehicle.

(5) If a vehicle no longer appears in the blue book or is too new to be listed in the blue book, the household's estimate of the value of the vehicle shall be accepted unless there is reason to believe the value is incorrect. If it appears that the vehicle's value shall affect eligibility, the household shall obtain an appraisal or produce other evidence of its value, such as a tax assessment or newspaper advertisement indicating the sale price of similar vehicles.

(C) Equity Value of Licensed Vehicles. The worker shall also determine the equity value of all licensed vehicles, except those described below which are equity exempt.

(1) The licensed vehicles described in Section 160 (A), and

(2) one licensed vehicle per household, regardless of use, and

(3) any other vehicle necessary for transportation to and from employment, training, or education in preparation for employment or to seek employment. This exclusion shall apply during temporary periods of unemployment.

Equity value is determined by taking the fair market value as determined in (B) above and subtracting any liens, mortgages or other encumbrances which are outstanding on the vehicle.

(D) Fair Market Value or Equity Value Shall be Counted. In the event a licensed vehicle is assigned both a fair market value in excess of \$4500 as in (B) and an equity value as in (C), only the greater of the two amounts shall be counted as a resource. For example, a second car which is not used to transport a household member to work must be evaluated for both fair market value and for equity value. If the fair market value is \$5000 and the equity value is \$1000, the household would have the \$1000 equity value counted against its resource limit

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because this amount is more than the \$500 (\$5000 - 4500) excess fair market value.

(E) Summary of Licensed Vehicles as Resources.

(1) Determine if the vehicle is an exempt resource in accordance with A above.

(2) If the licensed vehicle is not exempt, its countable value must be determined.

a. First, assess the fair market value over \$4500 in accordance with B above.

b. Second, determine if the licensed vehicle is equity exempt in accordance with C above. If not equity exempt, assess the vehicle's equity value.

c. If both a fair market value over \$4500 and an equity value were assigned to the licensed vehicle, only the greater of the two amounts is counted toward the household's resource eligibility limit in accordance with D above.

363.170: Special Resource Situations

(A) Jointly Owned Resources. Resources owned jointly by separate households shall be considered available in their entirety to each household unless the applicant/recipient household can demonstrate that the resource is inaccessible to that household. If the household has access to only a portion of the resource, the value of that portion shall be counted toward the household's resource level. The entire resource shall be deemed not available or inaccessible to the household only when the resource cannot practically be subdivided and the household's access to the value of the resource is dependent on the agreement of a joint owner who refuses to comply.

(B) Nonrecurring Lump Sum Payments

(1) Definition - Money received in the form of nonrecurring lump sum payment, includes but is not limited to, income tax refunds; rebates or credits; retroactive lump sum social security, public assistance, railroad retirement benefits or other payments; lump sum insurance settlements; and refunds of security deposits on rental property or utilities. These payments shall be counted as a resource in the month received, unless specifically exempt as a resource in Section 150.

(2) Action Required - When the receipt of a lump sum payment puts a household's total resources over the resource eligibility limit, the worker shall notify the household and allow the household to update its entire resource statement. If the household declines to update the resources, information on the amount of resources still exceeds the eligibility limit, the worker shall begin action to terminate, the household's certification in accordance with 106 CMR 366.200.

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(2) Action Required. When the receipt of a lump sum payment puts a household's total resources over the resource eligibility limit, the worker shall notify the household and allow the household to update its entire resource statement. If the household declines to update the resource information, the worker shall begin action to terminate the household's eligibility in accordance with Section 366.200.

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Page 363.180363.180: Transfer of Resources

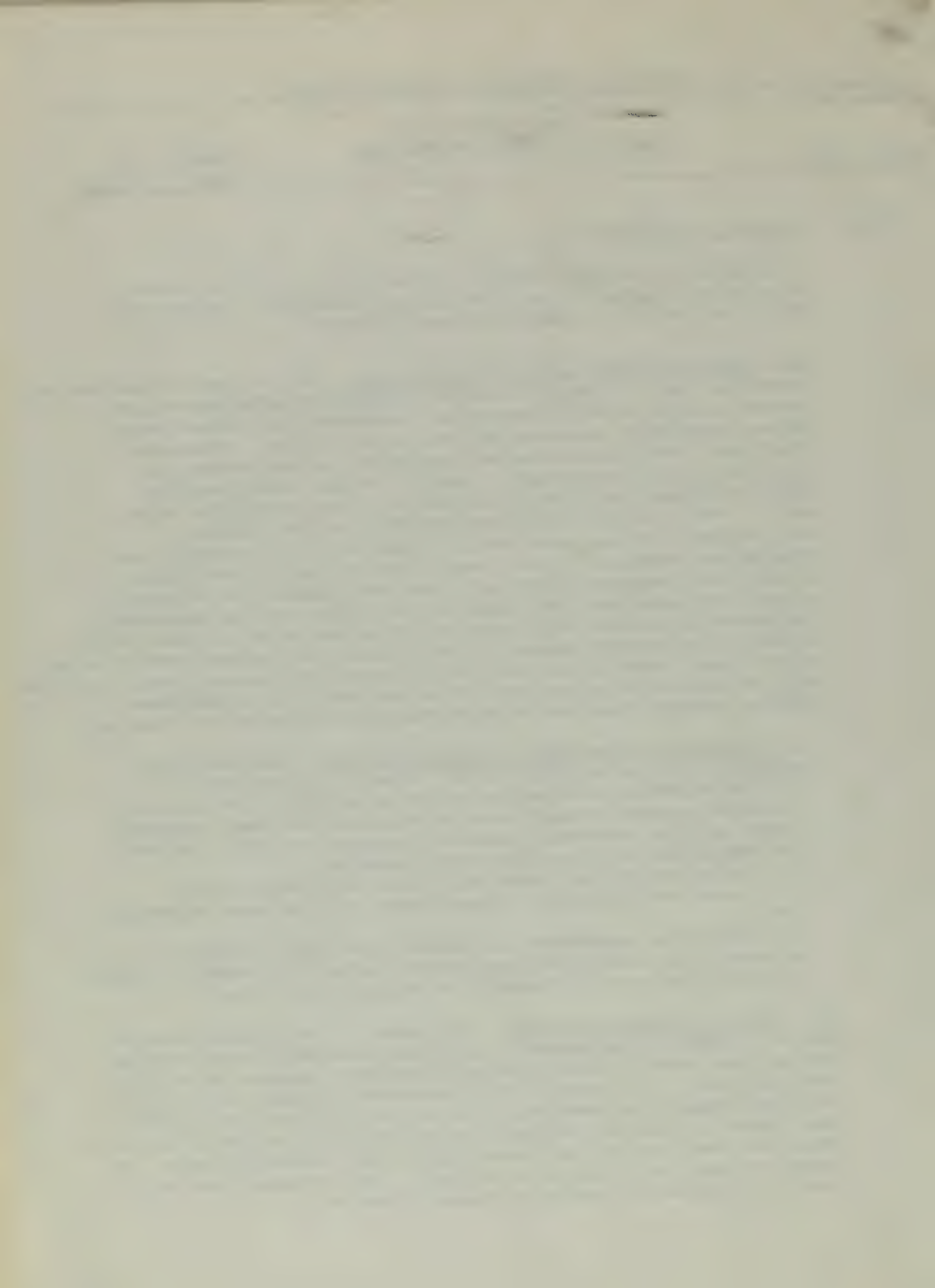
Transfer of resources made by a household in the three months prior to application or any time during a households' certification period may result in household disqualification.

(A) Transfers Resulting in Disqualification. At the time of application, households shall be asked to provide information regarding any resources which a household member has transferred within the 3-month period immediately preceding the date of application. Households which have transferred resources knowingly for the purposes of qualifying for or attempting to qualify for food stamp benefits shall be disqualified from participation in the program for up to one (1) year from the date of the discovery of the transfer. This disqualification period shall be applied if the resources are transferred knowingly in the 3-month period prior to application or if they are transferred knowingly after the household is determined eligible for benefits. An example of the latter would be assets which the household acquires after being certified and which are then transferred to prevent the household from exceeding the maximum resource eligibility limit. When action is taken to disqualify a current certified household, advance notice of adverse action and the right to continued benefits pending a hearing decision shall be provided to the household.

(B) Transfers Not Resulting In Disqualification. Eligibility for the program will not be affected by a transfer of resources:

- (1) which would not otherwise affect eligibility; for example, excluded personal property such as furniture, or money that when added to other non-exempt household resources was less than the allowable limits at the time of the transfer;
- (2) which are sold or traded at or near fair market value;
- (3) which are transferred between members of the same household; and
- (4) which are transferred for reasons other than qualifying or attempting to qualify for food stamp benefits, for example, a parent placing funds in an inaccessible educational trust fund.

(C) Period of Disqualification. The length of the disqualification period is based on the amount by which the non-exempt transferred resource, when added to other countable resources, exceeds the allowable resource limit. For example, if a one-person household with \$1,200 in a bank transferred ownership of a car worth \$5,000, only \$200 of that transfer would be considered because the first \$4,500 of the car's value was exempt and an additional \$300 of the transferred asset was applied toward the \$1,500 resource limit. The following chart will be used to determine the period of disqualification.



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Amount in Excess of the Resource Limit	Period of Disqualification
\$ 0 - 249	1 Month
250 - 999	3 Months
1,000 - 2,999	6 Months
3,000 - 4,999	9 Months
5,000 - and up	12 Months

363.200: Income

All income to the household, from whatever source, shall be counted when determining a household's eligibility and benefit level except when specifically excluded below. The income considered is that received during the period of certification. Because this period extends into the future, the income considered is usually income which is anticipated by the household.

363.210: Verification of Income

(A) Initial Application. The existence and amount of all gross non-exempt income shall be verified prior to certifying a household as eligible to participate in the Food Stamp Program. However, when all attempts to verify the income have been unsuccessful because the person or organization providing the income has failed to cooperate with the household and the worker, and all other sources of verification are unavailable, the worker shall determine an amount to be used for certification purposes based on the best available information.

(B) Recertification. Verification of income at recertification will be the same as at initial application (see (A) above).

(C) Reported Changes. Verification of a reported change in income is required when the source of the income has changed or the amount of income has changed.

(D) Verification of Excluded Income. Excluded income (such as loans) may be verified if the information given by the household is inconsistent with statements made by the applicant, other information on the application or previous applications, or with information known to the worker.

(E) Unreported Income. In addition to verifying reported income, the worker may have occasion to explore the possibilities of unreported income during the interview. When the applicant states that he has no earnings or other income during the interview. When the applicant states that he has no earnings or other income and the applicant is employable or it appears he may be eligible for other benefits such as social security, unemployment compensation, or public assistance, it may be necessary to

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verify that he is not receiving income from such sources. Additional situations in which the possibility of unreported income should be investigated, include but are not limited to: difficulty finding the head of the household at home, seasonal employment in an area which is at its peak season, or shelter costs higher than reported income, provided that nothing in this section shall limit the ability of the Department to verify information from other government agencies.

(F) Expenses Exceeding Income. A household's report of expenses which exceed its income may be grounds for a determination that further verification is required. However, this circumstance shall not, in and of itself, be grounds for a denial. The worker shall instead explore with the household how it is managing its finances, whether the household receives excluded income or has resources, and how long the household had managed under these circumstances.

(G) Methods of Verifying Income. Documentary evidence is the primary source of income verification. If other types of verification are used, the worker shall document in the case record why an alternate source was needed. When verifying that income is exempt as a loan, a legally binding agreement is not required. A simple statement signed by both parties which indicates that this payment is a loan and must be repaid is sufficient verification. However, if the household receives payments on a recurrent or regular basis from the same source but claims the payments are loans, the worker may also require that the provider of the loan sign an affidavit which states that repayments are being made or that payments will be made in accordance with an established repayment schedule.

(1) Earned Income. Following are examples of documents which can be used to verify earned income.

a. From Applicant - pay stubs, pay envelope, employee's W-2 form, wage tax receipts, State or Federal income tax return, self employment bookkeeping records, sales, and expenditure records.

b. From others - employer's wage records, statement from employer, and DES records.

(2) Unearned Income. Following are examples of documents which can be used to verify unearned income.

a. From applicant - social security award letter (changes in benefits will not always be reflected), benefit payment check, unemployment compensation award letter, pensions award notice, Veterans Administration award notice, correspondence on benefits, Income Tax records, Railroad Retirement award letter, support and

alimony payments evidenced by court order, divorce or separation papers, contribution check. From others - social security (Form SSA-1610), SDX files, Social Security District Office files, Division of Employment Security, employer's records, union records, Workmens Compensation records, Veterans Administration, insurance company records, tax records, Railroad Retirement Board records.

363.220: Countable Income

For food stamp purposes, countable income must be categorized as either earned or unearned.

(A) Earned Income

- (1) Wages. All wages and salaries paid to an employee are counted as earned income.
- (2) Self-Employment. The total gross income from a self employment enterprise, excluding the cost of doing business is counted as earned income. Payments from roomers and boarders are classified as earned self-employment income. Income from rental property shall be considered earned self-employment income only if a household member actively engages in the management of the property at least an average of 20 hours per week.
- (3) Training allowances. Training allowances from vocational and rehabilitative programs recognized by Federal, State, or local governments, such as the Work Incentive Program (WIN), and programs authorized by the Comprehensive Employment and Training Act (CETA), to the extent they are not a reimbursement, are counted as earned income.

(B) Unearned Income Any income that is not earned is unearned
This includes, but is not limited to:

- (1) Assistance Payments. Income from public assistance programs, such as Aid to Families with Dependent Children (AFDC); the General Relief Program (GR); or other assistance programs based on need.
- (2) Pensions, Social Security, Foster Care. Annuities; pensions; retirement; Veterans or Disability benefits; Workmens or Unemployment Compensation; Social Security (RSDI) benefits and SSI benefits; strike benefits; foster care payments for children or adults are counted as unearned income.
- (3) Support and Alimony. Support or alimony payments made directly to the household from non-household members are counted as unearned income.
- (4) Educational Grants. Scholarships, educational grants, fellowships, deferred payment loans for education, veteran's educational benefits and the like in excess of amounts excluded in Section 230 (D) are counted as unearned income.

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and support or alimony payments in amounts which legally must be paid to a household member. If an employer, agency, or former spouse who owes these funds to a household diverts them instead to a third party to pay for a household expense, these payments are still counted as income to the household. However, if an employer, agency, former spouse or other person makes payments for household expenses to a third party from funds that are not owed to the household, these payments are excluded as vendor payments.

(4) Payments which are not considered Income. The following payments are not income for food stamp purposes and should be disregarded when determining eligibility and benefit levels.

a. Child support payments made to AFDC recipients whether or not these payments are assigned to the Department by the recipient.

b. Monies withheld from any income source, earned or unearned, or monies received from any income source, earned or unearned which are voluntarily or involuntarily returned to the income source to repay a prior overpayment; provided that the overpayment is not excluded under Section 230 of this chapter.

For instance, monies being recouped from an AFDC grant are not counted as income to the household.

363.230: Excluded Income

Only the following kinds of income will be excluded and not be counted when determining household eligibility and benefit levels.

(A) In-Kind Income. Any gain or benefit, not in the form of money and payable directly to the household, is excluded from income. For example, meals, clothing, public housing, or produce from a garden would be excluded from income.

(B) Vendor Payments. A vendor payment is a money payment that is not payable directly to the household, but is paid to a third party for a household expense.

(1) A vendor payment shall be excluded from income whenever a person or organization outside of the household uses its own funds to make a direct payment to either a household's creditors or to a person or organization providing a service to the household.

a. If a relative who is not a household member pays the household's rent directly to a landlord from his or her own funds, the payment is considered a vendor payment and excluded from income.

b. HUD housing subsidies are excluded vendor payments.

c. Payments made under the Emergency Assistance (EA) Program are excluded vendor payments.

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and support or alimony payments in amounts which are legally obligated to a household member. Even if an employer, agency, or former spouse who owes these funds to a household diverts them to a third party to pay for a household expense, these payments are still counted as income to the household. However, if an employer, agency, former spouse or other person makes payments for household expenses to a third party from funds that are not legally obligated to the household, the payments are considered vendor payments and excluded from income.

(4) Payments Which Are Not Considered Income. The following payments are not income for food stamp purposes and should be disregarded when determining a household's eligibility and benefit level.

a. Child support payments made to AFDC recipients which must be assigned to the Department by the recipient under Title IV-D of the Social Security Act (Child Support Enforcement) to maintain AFDC eligibility are not considered income.

b. Monies withheld from any income source (earned or unearned) or monies received from any income source (earned or unearned) are not considered income if they are voluntarily or involuntarily returned to the income source to repay a prior overpayment and the overpayment is not excluded from income in section 230. For instance, monies being recouped from an AFDC grant are not counted as income to the household.

363.230: Excluded Income

Only the following kinds of income will be excluded when determining a household's eligibility and benefit level. All other payments received by household members are considered countable income.

(A) In-Kind Income. Any gain or benefit, not in the form of money and payable directly to the household, is excluded from income. For example, meals, clothing, public housing, or produce from a garden would be excluded from income.

(B) Vendor Payments. A vendor payment is a money payment that is not payable directly to the household, but is paid to a third party for a household expense.

(1) A vendor payment is excluded from income whenever a person or organization outside of the household uses its own funds to make a direct payment to a household's creditors or to a person or organization providing a service to the household. For example:

a. If a relative who is not a household member pays the household's rent directly to a landlord from his or her own funds, the payment is considered a vendor payment and excluded from income.

b. HUD housing subsidies are excluded vendor payments.

c. Payments made under the Emergency Assistance (EA) Program are excluded vendor payments.

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d. Payments made by government agency to a child care institution to provide day care to a household member are excluded vendor payments.

In summary, if the monies or payments paid to the third party are legally owed to the household, they are not excluded. Only monies or payments which are not legally owed to the household can qualify as excluded vendor payments.

(C) Infrequent Irregular Incomes. Any income in the certification period which is received too infrequently or irregularly to be reasonably anticipated, but not in excess of \$30 in a quarter.

(D) Educational Loans. Educational loans on which payment is deferred, grant, scholarships, fellowships, veterans' educational benefits, and the like to the extent that they are used for tuition and mandatory school fees at an institution of higher education. That is, an institution providing post high school education, including correspondence schools at that level, and schools for the physically or mentally handicapped at any level. Mandatory fees are those charged to all students or those charged to all students within a certain curriculum. For example, uniforms, lab fees, or equipment charged to all students to enroll in a chemistry course would be excluded. However, transportation, supplies, and textbook expenses are not uniformly charged to all students and therefore, would not be excluded as mandatory fees.

(E) Other loans. All loans, including loans from private individuals as well as commercial institutions, other than education loans on which payment is deferred are excluded from income.

(F) Reimbursements.

(1) Definition of Excluded Reimbursements. Reimbursements, for past or future expenses, to the extent they do not exceed actual expenses and do not represent a gain or benefit to the household are excluded from income. Reimbursements for normal living expenses of the household, such as rent or mortgage, personal clothing, or food eaten at home, are a gain or benefit and, therefore, are not excluded. To be excluded, these payments must be provided specifically for an identified expense, other than normal living expenses, and used for the purpose intended.

(2) Examples of Excluded Reimbursements

a. Reimbursement or flat allowances for job or training related expenses such as travel, per diem, uniforms, and transportation to and from the job or training site, which are provided over and above basic wages for these expenses are excluded. However, these expenses, if not reimbursed, are not otherwise

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deductible. Reimbursements for the travel expenses of migrant workers are also excluded.

b. Reimbursements for out-of-pocket expenses of volunteers incurred in the course of their work are excluded.

c. Medical or dependent care reimbursements are excluded.

d. Reimbursements or allowances to students for specific educational expenses, such as travel or books, are excluded. Allowances for normal living expenses such as food, rent, or clothing are counted. Portions of a general grant or scholarship must be specifically earmarked by the grantor for education expenses rather than for living expenses to be excluded as a reimbursement.

e. Reimbursements received by households to pay for services provided by Title XX of the Social Security Act are excluded. Title XX reimbursements for normal living expenses are not excluded under this provision.

(3) Reimbursements for Multiple Expenses. When a reimbursement including a flat allowance, covers multiple expenses, each expense does not have to be separately identified as long as none of the reimbursement covers normal living expenses.

(4) Reimbursements Exceeding Expenses. The amount by which a reimbursement exceeds the actual incurred expense shall be counted as income. However, reimbursements shall not be considered to exceed actual expenses, unless the provider or the household indicates the amount is excessive.

(G) Monies Received for Third Parties. Monies received and used for the care and maintenance of a third part beneficiary who is not a household member are excluded from income. If the intended beneficiaries of a single payment include both household and nonhousehold members, any identifiable portion of the payment intended and used for the care and maintenance of the nonhousehold member shall be excluded. If the nonhousehold member's portion cannot be readily identified, the payment shall be evenly prorated among intended beneficiaries and the exclusion applied to the nonhousehold member's prorata share or the amount actually used for the nonhousehold member's care and maintenance, whichever is less.

(H) Earnings of Children. The earned income of children who are members of the household, students at least half-time and under eighteen, is excluded from income. This exclusion continues during temporary interruptions in school attendance due to semester or vacation breaks, provided the child's enrollment will resume following the break. If the child's earnings or the amount of work performed cannot be differentiated from that of the other household members, the total earnings shall be prorated equally among the working members and the child's prorata share excluded. Individuals are considered children for this

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exclusion if they are under the parental control financial or otherwise of a household member.

(I) Non-Recurring Lump Sum Payments. Money received in the form of non-recurring lump sum payments is excluded from income. For example, tax refunds, rebates or credits, retroactive lump sum Social Security PA payments, Railroad Retirement benefits or other payments, retroactive lump sum insurance settlements and refunds of security deposits on rental property or utilities are excluded. These payments shall be counted as a resource in the month received unless exempt from consideration as a resource in accordance with section 150.

(J) The Cost of Producing Self-Employment Income. 106 CMR 365.900 through 930 contains the procedures for computing the cost of self-employment income.

(K) Income Excluded by Law. Certain income is excluded for food stamp purposes by a specific provision in Federal law. The following is a current listing of income excluded by Federal law.

- (1) Reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policy Act of 1970.
- (2) Payments received under the Alaska Native Claims Settlement Act.
- (3) Any payment to volunteers under Title II (RSVP, foster grandparents, and others) and Title III (SCORE and ACE) of the Domestic Volunteer Services Act of 1973 as amended. Payments under Title I (VISTA) to volunteers shall be excluded for those individuals receiving food stamps or public assistance at the time they joined VISTA. Temporary interruptions in food stamp participation shall not alter the exclusion once an initial determination has been made.
- (4) Income derived from certain submarginal land of the United States which is held in trust for certain Indian tribes.
- (5) Payments from the Crisis Intervention Program (CIP) administered by the Community Services Administration (CSA).
- (6) Payments received from the Youth Incentive Entitlement Pilot Projects, the Youth Community Conservation and Improvement Projects, and the Youth Employment and Training Programs under the Youth Employment and Demonstration Project Act of 1977 but not payments from the Adults Conservation Corps under the Act nor any other payments under the Comprehensive Employment and Training Act (CETA).

(L) Income From Non-Household Members. The income of non-household members that have not been disqualified, such as ineligible aliens and ineligible tax dependents, is excluded from income when determining the eligibility and benefit level of the remaining household members.

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exclusion if they are under the parental control financial or otherwise of a household member.

(I) Non-Recurring Lump Sum Payments. Money received in the form of non-recurring lump sum payments is excluded from income. For example, tax refunds, rebates or credits, retroactive lump sum social security or SSI benefits, PA payments, Railroad Retirement benefits, retroactive lump sum insurance settlements and refunds of security deposits on rental property utilities are excluded. These payments shall be counted as a resource in the month received unless exempt from consideration as a resource in accordance with section 363.150.

(J) The Cost of Producing Self-Employment Income. 106 CMR 365.900 through 365.930 contains the procedures for computing the cost of self-employment income.

(K) Income Excluded by Law. Certain income is excluded for food stamp purposes by a specific provision in Federal law. The following is a current listing of income excluded by Federal law.

(1) Reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policy Act of 1970.

(2) Payments received under the Alaska Native Claims Settlement Act, and from the disposition of funds to the Grand River Band of Ottawa Indians.

(3) Any payment to volunteers under Title II (RSVP, foster grandparents, and others) and Title III (SCORE and ACE) of the Domestic Volunteer Services Act of 1973 as amended. Payments under Title I (VISTA) to volunteers shall be excluded for those individuals receiving food stamps or public assistance at the time they joined VISTA.

Households that are receiving an exemption for a VISTA or other Title I subsistence allowance at the time of conversion to the Food Stamp Act of 1977 shall continue to receive that exemption for the length of their volunteer contract in effect at the time of conversion. Temporary interruptions in food stamp participation shall not alter the exclusion once an initial determination has been made.

(4) Income derived from certain submarginal land of the United States held in trust for certain Indian tribes.

(5) Payments from the Crisis Intervention Program (CIP) administered by the Community Services Administration (CSA).

(6) Payments received from the youth incentive entitlement pilot projects, and (the youth community conservation and improvement projects,) youth employment and training programs under Title IV of the Comprehensive Employment and Training Act Amendments of 1978.

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(7) Earned income tax credits received before January 1, 1980, as a result of Public Law 95-600, the Revenue Act of 1978.

(8) Payments or allowances made to or on behalf of a household for energy assistance under any Federal, State, or local law. These payments or allowances must be clearly identified as energy assistance by the legislative body authorizing the program or providing the funds. The effective dates of exclusion are October 1, 1979 for payments made under the Emergency Energy Crisis Program, and November 27, 1979 for payments made under the Energy Crisis Assistance Program administered by CAP agencies. For all other energy assistance programs the effective date of exclusion is October 1, 1980.

(L) Income from Non-household Members. The income of non-household members that have not been disqualified, such as ineligible aliens and ineligible students, is excluded from income when determining the eligibility and benefit level of the remaining household members.

106 CMR 363: TABLE 1

DETERMINING RESOURCE VALUE OF LICENSED VEHICLES

1. IDENTIFY TOTALLY EXEMPT VEHICLES	2. ASSESS FAIR MARKET VALUE IN EXCESS OF \$4500 FOR ALL OTHER VEHICLES
3. IDENTIFY EQUITY EXEMPT VEHICLES	4. ASSESS EQUITY VALUE OF ALL VEHICLES NOT EQUITY EXEMPT

COUNT THE GREATER OF THE TWO AMOUNTS -
FAIR MARKET VALUE IN EXCESS OF \$4500 OR
EQUITY VALUE - TOWARD THE HOUSEHOLD'S
RESOURCE ELIGIBILITY LIMIT

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364.050: Introduction

Upon receipt of a completed application, including all required verification and documentation, the worker must determine if the household is eligible to participate in the Food Stamp Program.

For households which contain a member who is sixty years of age or older, or a member who receives Social Security disability benefits, or a member who receives Supplemental Security Income (SSI) benefits, eligibility shall be determined on the basis of the household's net income. For all other households, eligibility shall be determined on the basis of the household's gross income.

For eligible households, the worker must calculate the household's benefit level. The benefit level is the monthly allotment of stamps the household is eligible to receive.

364.100: Month of Application

The month of application is the calendar month in which the household applies. Generally, the month of application will be the first month of the household's certification period.

364.110: Initial Applications

For most households submitting an initial application, eligibility will be based on the household's circumstances for the entire month of application.

- (A) If the worker finds a household ineligible for the month of application, but eligible in the following month(s) because of anticipated changes, the same application shall be used to deny benefits for the month of application and to approve benefits for the following month(s). Even though denied for the month of application, the household does not have to re-apply to receive benefits for the month(s) following the month of application. The worker shall use the month of ineligibility, however, as the first month of the household's certification period.

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- (B) If the worker finds a household eligible for the month of application, but ineligible in the following month(s) because of anticipated changes, the household shall be paid benefits for the month of application even if the allotment is not issued until the following month.
- (C) If the worker finds that an eligible household's allotment for the month of the application is different from the household's allotment in the following month(s) because of anticipated changes, s/he shall vary the household's basis of issuance within the certification period to reflect the anticipated changes, unless the household elects to have its income averaged over the certification period.

364.120: Recertifications

Eligibility and the level of benefits for recertifications shall be determined based on circumstances anticipated for the certification period starting the month following the expiration of the current certification period. If an application for recertification is received later than one month from the date the last certification period expired, the application is considered an initial application and benefits for that month must be prorated in accordance with Section 364.650.

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364.200 Determining Resources

The household's resources at the time the application is filed shall be used to determine the household's eligibility. (See 106 CMR 363.100 through 363.180).

364.300 Determining Income

All income received or anticipated to be received over the certification period must be considered when determining the household's eligibility and benefit level. The worker shall determine the household's monthly countable income.

364.310 Income Anticipated in the Certification Period

To determine a household's eligibility and benefit level, the worker shall take into account the income already received by the household during the certification period and any anticipated income the household and the worker are reasonably certain will be received during the remainder of the certification period. If the amount of income that will be received or when it will be received is uncertain, that portion of the household's income that is uncertain shall not be counted by the worker. For example, a household anticipating income from a new source, such as a new job, may be uncertain as to the timing and amount of the initial payment. These monies shall not be anticipated by the worker as countable income unless there is reasonable certainty of the amount of the payment and the month in which payment will be received. If the exact amount of the income is not known, that portion of it which is anticipated with reasonable certainty is considered income. Where receipt of income is reasonably certain but the monthly amount may fluctuate, the household may elect to income average.

364.320 Anticipating Income

Income received during the previous 30 days shall be used as an indicator of anticipated income. If income fluctuates to the extent that a 30 day period alone cannot provide an accurate indication of anticipated income, the worker may use a longer period of past time as an indicator of future income. The amount(s) of any past income shall not be automatically attributed to the household. In no case past income be relied upon when a change in income has occurred or can be anticipated.

(A) Income From Steady Employment. In cases where the head of the household is steadily employed, income from previous months is usually

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a good indicator of the amount of income that can be anticipated in the month of application and subsequent months. If information supplied by the household or a collateral contact indicates that future income will differ substantially from the previous month's income, the worker will use such information to make a reasonable estimate of anticipated income. The method used to determine income must be fully documented in the case file.

(B) Income from Hourly and Piecework Employment. When income is received on an hourly wage or piece work basis, weekly income may fluctuate if the wage earner works less than 8 hours some days or is required to work overtime on others. In this case, the worker should consult with the household to determine the "normal" amount of income to be expected as a result of 1-week's work. This amount should be used to determine monthly income.

(C) Income from Seasonal Employment. In cases where the household's income is seasonal, the worker may find it more appropriate to use the income from the most recent earning season comparable to the certification period, rather than the past 30 days as an indicator of anticipated income. The worker shall exercise particular caution in using income from a past season as an indicator of income for the certification period. In many cases of seasonally fluctuating income, the income also fluctuates from one season in one year to the same season in the next year.

364.330 Income Counted in the Month Received

Income anticipated during the certification period shall be counted as income only in the month it is expected to be received, unless the income is averaged. Nonrecurring lump-sum payments are counted as a resource starting in the month received and not counted as income.

364.340 Income Averaging

In some cases income averaging is required. In other cases, the household may elect to average fluctuating income over the certification period. Whenever a full month's income is anticipated but is received on a weekly or biweekly basis, the worker shall convert the income to a monthly amount by multiplying weekly amounts by 4 1/3 or by 4.333 and biweekly amounts by 2.167.

(A) Mandatory Income Averaging.

(1) Annual Income in Shorter Period. Households that derive their income in a period of time shorter than one year shall have their income averaged over a 12-month period, provided the income is not received on an hourly or piecework basis. These households may

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include school employees, share croppers, farmers and other self-employed households, but not migrant or seasonal farm workers. For a detailed discussion of self-employed households see 106 CMR 365.900.

(2) Educational Grants, etc. Households receiving scholarships, deferred education loans, or other educational grants shall have such income, after exclusions, averaged over the period for which it was provided. See Section 365.700 for a detailed discussion of student households.

(B) Optional Income Averaging. Households, except destitute households, may choose to have their income averaged over the certification period. The number of months used to arrive at the average monthly income need not be the same as the number of months in the certification period. For example, if fluctuating income over the previous three months is known and the worker is reasonably certain that this income is representative of the fluctuations anticipated in the coming months, the income from the three known months may be averaged over a certification period of longer than three months.

(C) Assistance Payments. Households receiving State or Federal assistance payments, such as AFDC, GR, SSI, or Social Security payments, on a recurring, monthly basis shall not have their monthly income from these sources varied merely because mailing cycles may cause two payments to be received in one month and none in the next month.

(D) Withheld Wages. Wages held at the request of the employee shall be considered income to the household in the month the wages would otherwise have been paid by the employer. However, wages held by the employer as a general practice, even if in violation of law, shall not be counted as income to the household, unless the household anticipates that it will ask for and receive an advance, or the household anticipates that it will receive income from previously held wages that were not previously counted as income by the worker. When reasonably anticipated, advances on wages shall count as income in the month received.

364.350 Determining Income for Special Situation Households

Determining income for PA households, student households, striker households, households with income from self-employment and other households with special circumstances is discussed in 106 CMR 365.000.

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364.360: Determining Eligibility Based on Gross Income

Except for households which contain a member who is 60 years of age or older, a member who receives Social Security disability benefits, or a member who receives SSI benefits, eligibility for food stamps is based on the household's gross income.

Once the household's countable gross monthly income after exclusions (Section 363.230) has been determined, the worker must determine whether the household meets the Food Stamp Program gross monthly income standard for the appropriate household size. Refer to Section 364.950, Maximum Monthly Gross Income Standards. Households with income in excess of the gross standards are ineligible to participate in the Food Stamp Program. Gross monthly income standards for the Food Stamp Program are set at 130% of the Office of Management and Budget's nonfarm income poverty guidelines and are adjusted annually on July 1st of each year.

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364.400: Determining Deductions

There are five deductions from income. No other deductions are allowed.

- (A) Standard Deduction. A standard deduction of \$85.00 per month is allowed for each household.
- (B) Earned Income Deduction. Eighteen percent of gross monthly earned income is allowed as a deduction. No additional deduction(s) from earned income shall be made. Excluded earned income is not subject to this deduction.
- (C) Excess Medical Deduction. Medical expense(s) in excess of \$35 per month are allowed as a deduction when the expense is incurred by a household member who is 60 years of age or over or who receives disability benefits under Title II (RSDI) or SSI benefits under Title XVI of the Social Security Act. Spouses and other household members are not eligible for this deduction even if they are receiving benefits as a dependent of the SSI or Social Security disability recipient, but persons receiving emergency SSI benefits based on presumptive eligibility are eligible for this deduction. Special diets are not an allowable medical expense. Allowable medical expenses include only the following:
 - (1) Medical and dental care, including psychotherapy and rehabilitation services provided by a licensed practitioner or by any other qualified health professional.
 - (2) Hospitalization (inpatient or outpatient) or nursing home care in a state recognized facility and nursing care. Payments made by the household for an individual who was a food stamp household member immediately prior to entering a hospital or nursing home are an allowable deduction under this provision.
 - (3) Prescription drugs when prescribed by a licensed practitioner; over-the-counter medical medication, including insulin, when approved by a licensed practitioner or other qualified health professional; and the cost of medical supplies, sick-room equipment (including rental) or other prescribed equipment.
 - (4) Health and hospitalization insurance policy premiums. The premiums for health and accident policies such as those payable in lump sum settlements for death or dismemberment and the premiums for income maintenance policies such as those that continue mortgage and loan payments while the beneficiary is disabled are not deductible.
 - (5) Medicare premiums.
 - (6) Any cost-sharing or spend down expenses incurred by Medicaid recipients.
 - (7) Dentures, hearing aids and prosthetics.

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The following steps lead to the determination of net monthly income for all other households. The calculation is done using exact amounts with cents included throughout. All income, deductions and costs are to include cents, down to and including the monthly net income figure.

(A) Total Gross Earned Income. To determine gross monthly earned income add the gross monthly income earned by all household members (including self-employment income), minus income exclusions.

(B) Earned Income Deduction. To determine net monthly earned income multiply the gross earned income by 82%.

(C) Unearned Income. Add to net monthly earned income the total monthly unearned income of all household members, minus income exclusions.

(D) Standard Deduction. Subtract the standard deduction of \$85.

(E) Medical Expenses. Total allowable medical expenses, less reimbursements (e.g. by a third party insurer) for those household members who are 60 years of age or over or who receive SSI benefits under Title XVI or Social Security disability benefits under Title II of the Social Security Act. If these costs exceed \$35 per month, go to the next step.

(F) Medical Deduction. Subtract that portion of the medical expenses which exceeds \$35 per month.

(G) Dependent Care Deduction. Subtract monthly dependent care expenses, if any, up to \$115. If dependent care expenses are \$115 or more and no household member is 60 years of age or over or receives SSI benefits under Title XVI or Social Security disability benefits under Title II of the Social Security Act, the household's net monthly income has been determined. For all other households the worker must compute the household's shelter expenses in accordance with (H) below.

(H) Excess Shelter Expense. To determine excess shelter expense, total allowable shelter expenses. Subtract from the shelter expense 50 percent of the household's preliminary adjusted net income (monthly income after all the above deductions have been subtracted). The remaining amount, if any, is the excess shelter expense. If there is no excess shelter expense, the household's net monthly income has been determined. If there is excess shelter expense, go to the next step.

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- (8) Securing and maintaining a seeing eye dog or hearing dog including the cost of dog food and veterinarian bills.
- (9) Eye glasses prescribed by a physician skilled in eye disease or by an optometrist.
- (10) Reasonable cost of transportation and lodging to obtain medical treatment or services.
- (11) Maintaining an attendant, homemaker, home health aide, housekeeper or child care services which are necessary due to age, infirmity or illness. When these services qualify as either a Medical deduction or a dependent care deduction, the expense is treated as a medical deduction. In addition to the actual expense of these services, an amount equal to a one person coupon allotment shall be deducted if the household furnishes a majority of meals to the person providing the service. The allotment for this meal related deduction is that in effect at the time the household is given the deduction. If the allotment amount changes during a certification period, the total deduction amount must be updated to reflect the new allotment amount no later than the household's next scheduled recertification.

(D) Dependent Care Deduction. Payment for the actual costs of the care of a child or other dependent when necessary for a household member to accept or continue employment, seek employment in compliance with the job search criteria (or an equivalent effort by those not subject to job search) or attend training or education preparatory to employment is allowed as a deduction. This deduction shall not exceed \$115.00 per month.

(E) Shelter Deduction. A deduction is allowed for monthly shelter expenses in excess of 50 percent of the household's income after all of the above deductions have been allowed. Except for households containing a member who is age 60 or over or who receives SSI benefits under Title XVI or Social Security disability benefits under Title II of the Social Security Act including persons receiving emergency SSI benefits based on presumptive eligibility, the shelter deduction alone or in combination with the dependent care deduction shall not exceed \$115.00 per month. If the household contains a member who is age 60 or over or who receives SSI benefits under Title XVI or Social Security disability benefits under Title II of the Social Security Act, this limit on the shelter deduction amount does not apply. A shelter deduction is allowed only for the following expenses:

- (1) Continuing charges for the shelter occupied by the household, including rent, mortgage, or other continuing charges leading to the ownership of shelter, such as loan repayments for the purchase of a mobile home, including interest on such payments.
- (2) Property taxes, State and local assessments, and insurance on the structure itself, but not the separate expense of insuring furniture or personal belongings.

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(3) Charges for heating, cooling, and cooking fuel; electricity; water and sewer; garbage and trash collection fees; the basic service fee for one telephone, including tax on the basic fee; and fees charged by the utility provider for initial installation of the utility. One time deposits shall not be included as shelter costs.

(4) The above shelter expenses for a home not actually occupied by the household because of employment or training away from home, illness or abandonment of the home due to natural disaster or casualty loss. Shelter expenses for a vacated home are included in the shelter deduction only when the household intends to return to the home and the current occupants of the home, if any, are not claiming a shelter deduction for food stamp purposes and the home is not leased or rented during the absence of the household.

(5) Charges for repair of a home substantially damaged in a natural disaster such as fire or flood are allowed as a shelter deduction unless the repair charge has been or will be reimbursed by private or public relief agencies, insurance companies or from any other source.

(F) Standard Utility Allowance. The Standard Utility Allowance is a monthly deduction that includes the following utility expenses: charges for fuel for heating, cooling and cooking; electricity; water and sewer; garbage and trash collection; and the basic service fee for one telephone, including tax on the basic fee; and fees charged by the utility provider for initial installation of the utility. When calculating the household's shelter expense, the standard allowance must be added to any other allowable shelter expenses claimed by the household.

(1) Households Ineligible to Use the Standard Utility Allowance - Households which do not incur any utility expenses separate from rent or mortgage payments and households which incur separate expenses for telephone, water and sewer, or garbage and trash collection only are not entitled to use the Standard Utility Allowance. When calculating the monthly shelter expense for these households, actual amounts are used for all utilities except telephone. The allowance for telephone expense is \$12.00 regardless of actual cost.

(2) Households Required to Use the Standard Utility Allowance - All other households shall have monthly shelter expenses calculated using the Standard Utility Allowance from the table (see section 960) unless the household can verify that the actual utility expenses exceed the standard allowance and use of actual utility expenses would result in a deduction. A household may switch between actual utility expenses and the standard allowance once during a certification period.

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364.410: Determining Deductible Expenses

The worker determines which claimed expenses are deductible and their amounts.

(A) Limitations on Deductible Expenses. The allowable expenses for medical care, dependent care and shelter are described in section 400. Education expenses and the cost of doing business for the self-employed are income exclusions and are to be handled in accordance with 106 CMR 363.230(D) (student households) and 106 CMR 363.230(J) (self-employed households).

(B) Types of Non-Deductible Expenses.

(1) No claimed expense is an allowable deduction unless the household makes a money payment for the service and the service is provided by someone outside the food stamp household.

(2) Any expense covered by a reimbursement or vendor payment which is excluded from income is not an allowable deduction. For example, if a household pays no rent because an excluded vendor payment is made to the landlord on behalf of the household, the rent expense is not an allowable shelter deduction.

(3) A medical expense or that portion of a medical expense for which the applicant/recipient receives reimbursement is not an allowable medical deduction. For example, if a third-party insurer such as Medicare reimburses a recipient for 80 percent of the billed expense, only the non-reimbursible 20 percent of the total medical expense is included as part of the household's medical deduction. The non-reimbursible portion is allowed as a medical deduction when reimbursement is received or the amount of reimbursement can be otherwise verified.

364.420: Anticipating Expenses

The worker must make a reasonable prediction of the amount the household expects to be billed during the certification period for allowable medical, dependent care and shelter expenses. Anticipation of the expense is based on the most recent month's bills unless the household is reasonably certain a change will occur. When the household is claiming actual utility expenses, the worker may anticipate changes during the certification period based on last year's bills from the same period updated by overall price increases. If only the most recent bill is available, utility cost increases or decreases over the months of the certification period may be based on utility company estimates for the type of dwelling and utilities used by the household. The worker shall not average past expenses as a method of anticipating utility expenses for the certification period.

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the self-employed are income exclusions and are to be handled in accordance with 106 CMR 363.230(D) (student households) and 106 CMR 363.230(J) (self-employed households).

(B) Types of Non-Deductible Expenses. An expense covered by excluded reimbursements or vendor payments shall not be deductible. For example, the portion of rent covered by excluded vendor payments is not considered part of a household's shelter costs. Furthermore, expenses are deductible only if the service is provided by someone outside the household and the household makes a money payment for the service. For example, a dependent care deduction is not allowed if another household member provides the care, or compensation for the care is provided in the form of an in-kind benefit such as food.

364.420: Anticipating Expenses

The worker must make a reasonable prediction of the child care and shelter costs for which the household expects to be billed during the certification period. Anticipation of the expense shall be based on

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364.430: Expenses Deducted in the Month Due

Except for expenses the household elects to average, the expense is deducted in the month it is billed or otherwise becomes due, regardless of when the household intends to pay the expense. For example, rent which is due each month is included in the household's monthly shelter deduction even if the household does not pay the rent each month.

A particular expense may be deducted only once. Amounts carried forward from past billing periods are not deductible in a subsequent month even if included in the most recent billing or actually paid by the household in the most recent billing period.

364.440: Averaging Expenses

Households may elect to average fluctuating or one-time deductible expenses instead of taking a deduction in the month the expense is billed or otherwise becomes due.

(A) Except for medical expenses one-time only expenses are averaged over the entire certification period in which they are billed regardless of when the expense is reported by the household.

One-time only medical expenses which are reported during a certification period may be taken as a one-time deduction or averaged forward over the remaining months of the certification period.

If the household elects to average the expense, the averaging begins the month the change becomes effective.

(B) Expenses billed less often than monthly are averaged forward over the interval between scheduled billings. If there is no scheduled interval between billings, the expense is averaged forward over the period the expense is intended to cover. For example, if a household receives a single bill in February for a three month supply of fuel oil, the household may elect to average the deductible amount over the months of February, March and April instead of taking a one-time deduction.

(C) Expenses billed more often than monthly must be converted to a monthly amount. To convert these expenses to a monthly amount the worker must multiply weekly amounts by $4 \frac{1}{3}$ or 4.333 and bi-weekly amounts by 2.167.

364.450: Verification of Deductible Expenses at Initial Certification

(A) Utility Expenses. Actual utility expenses higher than the standard allowance, claimed by a household entitled to use the standard allowance, must be verified if use of the actual utility expense result in a deduction. When the actual utility expenses cannot be verified in time to meet the 30 day application processing standard, the standard allowance is used to determine the household's eligibility and benefit level. If the household subsequently verifies the actual utility expenses, the worker shall treat the information as a reported change.

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separately from other shelter costs.

(B) Deductible expenses, other than utility costs, are verified prior to certification only if questionable. Questionable means that information on the application is inconsistent with statements made by the applicant, other information on the application or previous applications, or with information known to the worker. For example, rent, even if questionable, would not be verified if the household's child care expenses exceeded the limit on the combined dependent care/shelter deduction because allowing the rent would not result in a deduction. If a deductible expense must be verified and obtaining the verification may delay the household's certification, the worker shall advise the household that the household's eligibility and benefit level may be determined without providing a deduction for the claimed but unverified expense. Shelter costs would be computed without including the the questionable and unverified components. The Standard Utility Allowance shall be used if the household is entitled to use the standards and has not verified higher actual costs. If the expense cannot be verified within 30 days of the date of application, the worker shall determine the household's eligibility and benefit level without the deduction for the unverified expense. If the household subsequently provides the missing verification, the worker shall treat the information as a reported change and provide increased benefits, if any, in accordance with the timeliness standards for reported changes. (See 106 CMR 366.120) The household is entitled to the restoration of any benefits as a result of the disallowance of the expense only if the expense could not be verified within the 30-day processing standard because the worker failed to allow the household at least 10 days from the date of the initial request to provide the verification. If the household would be ineligible unless the expense is allowed, the worker shall send the household a Notice of Pending Status on the 30th day, following the date of application.

(C) Shelter Costs for Unoccupied Homes. Households that wish to claim shelter costs other than utility costs for a home that is unoccupied because of employment or training away from the home, illness, or abandonment caused by a natural disaster or casualty loss are responsible for providing verification of the expense if it is questionable and if the expense would result in a deduction. The worker is not required to assist households in obtaining verification of this expense if the verification would have to be obtained from a source outside of the state. Actual utility costs for unoccupied homes must be verified if the costs would result in a deduction. The standard utility allowance shall not be used.

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(B) Utility Expenses for Unoccupied Homes. Actual utility expenses for a home that is unoccupied because of employment or training away from the home, illness or abandonment caused by a natural disaster or casualty loss must be verified if use of the expenses claimed by the household would actually result in a deduction. The Standard Utility Allowance cannot be used to determine the household's eligibility or benefit level. Other shelter expenses are verified only if questionable. The worker is not required to assist the household to obtain verification if the verification is from a source outside Massachusetts.

(C) Medical Expenses. The amount of allowable medical expenses, including the amount of reimbursement (e.g. by a third-party insurer), must be verified prior to initial certification if use of the expenses would actually result in a deduction. Additional verifications relevant to the claimed medical expenses, such as the allowability of services provided or the eligibility of the person incurring the cost, are not required unless the information provided by the applicant/recipient is questionable (see 106 CMR 361.620).

(D) Other Expenses. Other deductible expenses are verified prior to initial certification only when questionable and use of the expense claimed by the household would actually result in a deduction. For example, if a household's dependent care expense entitled the household to the maximum dependent care/shelter deduction, shelter expenses would not be verified even if questionable.

If a deductible expense must be verified, but obtaining the verification would delay the household's certification, the worker must inform the household that it may elect to be certified without receiving a deduction for the claimed but unverified expense. The Standard Utility Allowance is used for households entitled to use the standard. If the household subsequently provides the missing verification, the worker shall treat the information as a reported change and provide increased benefits, if any, in accordance with the timeliness standards for reported changes. The household is not entitled to lost benefits unless the expense could not be verified within the 30 day processing standard because the worker failed to allow the household at least 10 days from the date of the initial request to provide the verification or because the worker failed to provide the household assistance when required. Households ineligible because a claimed but unverified expense is disallowed must be sent a Notice of Pending/Denial on the 30th day following the date of application.

364.500: Determining Net Income

The net monthly income of destitute households is calculated in accordance with the provisions of 106 CMR 365.800 through 365.890.

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The following steps lead to the determination of net monthly income for all other households. The calculation is done using exact amounts with cents included throughout. All income, deductions and costs are to include cents, down to and including the monthly net income figure.

(A) Total Gross Earned Income. To determine gross monthly earned income add the gross monthly income earned by all household members (including self-employment income), minus income exclusions.

(B) Earned Income Deduction. To determine net monthly earned income multiply the gross earned income by 80%.

(C) Unearned Income. Add to net monthly earned income the total monthly unearned income of all household members, minus income exclusions.

(D) Standard Deduction. Subtract the standard deduction of \$85.

(E) Medical Expenses. Total allowable medical expenses, less reimbursements (e.g. by a third party insurer) for those household members who are 60 years of age or over or who receive SSI benefits under Title XVI or Social Security disability benefits under Title II of the Social Security Act. If these costs exceed \$35 per month, go to the next step.

(F) Medical Deduction. Subtract that portion of the medical expenses which exceeds \$35 per month.

(G) Dependent Care Deduction. Subtract monthly dependent care expenses, if any, up to \$115. If dependent care expenses are \$115 or more and no household member is 60 years of age or over or receives SSI benefits under Title XVI or Social Security disability benefits under Title II of the Social Security Act, the household's net monthly income has been determined. For all other households the worker must compute the household's shelter expenses in accordance with (H) below.

(H) Excess Shelter Expense. To determine excess shelter expense, total allowable shelter expenses. Subtract from the shelter expense 50 percent of the household's preliminary adjusted net income (monthly income after all the above deductions have been subtracted). The remaining amount, if any, is the excess shelter expense. If there is no excess shelter expense, the household's net monthly income has been determined. If there is excess shelter expense, go to the next step.

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(I) Shelter Deduction

If the household contains a member who is 60 years of age or over or who receives SSI benefits under Title XVI or disability benefits under Title II of the Social Security Act, subtract the full amount of the excess shelter expenses. For all other households subtract excess shelter expenses up to the maximum deduction amount. The maximum deduction amount for shelter is \$115 minus the dependent care expenses, if any. The household's net monthly income has been determined.

This calculation results in a determination of the household's net monthly income.

364.550: Determining Eligibility Based on Net Income

For households which contain a member who is 60 years of age or older, a member who receives Social Security disability benefits, or a member who receives SSI benefits, eligibility is based on the household's net income. Participation in the program shall be limited to those households whose income meets the Food Stamp Program income eligibility standards for the appropriate household size. The income eligibility standards are set at the Office of Management and Budget's non-farm poverty guidelines and are adjusted annually on July 1st of each year (see Section 364.970, Maximum Allowable Monthly Net Income Standards).

Net income standards shall not be applied to all other food stamp households.

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364.600: Determining the Benefit Level

Once a household has been determined eligible for the Food Stamp Program considering both non-financial and financial eligibility standards, the worker must determine the household's benefit level or monthly allotment.

(A) Household Size 1-8

Refer to Section 364.980, Food Stamp Program Issuance Tables, to find the monthly allotment amount based on the household's monthly net income (which includes cents) and household size. The minimum monthly allotment for 1 and 2 person households is \$10.

Certain households with 3 or more members who meet the gross or net income eligibility standards are not entitled to Food Stamp benefits. These households must be denied eligibility on the grounds that their net income exceeds the level at which benefits are issued.

(B) Household Size Over 8

- (1) Determine the maximum coupon allotment for the household size by adding \$53 for each person in excess of 8 to the maximum coupon allotment for an 8 person household.
- (2) Determine the household's monthly net income in accordance with Section 364.500.
- (3) Multiply the household's monthly net income (with cents included) by 30%. After this calculation, round down to the next whole dollar for amounts from 1 through 49 cents and up to the next whole dollar for amounts of 50 cents or more.

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(I) Shelter Deduction. If the household contains a member who is 60 years of age or over or who receives SSI benefits under Title XVI or disability benefits under Title II of the Social Security Act, subtract the full amount of the excess shelter expenses. For all other households subtract excess shelter expenses up to the maximum deduction amount. The maximum deduction amount for shelter is \$115 minus the dependent care expenses, if any. The household's net monthly income has been determined.

This calculation results in a determination of the household's net monthly income. Participation in the program shall be limited to those households whose income meets the Food Stamp Program income eligibility standards for the appropriate household size. The income eligibility standards are derived from the Office of Management and Budget non-farm poverty guidelines and are adjusted annually on July 1st of each year (see Section 364.970, Maximum Allowable Monthly Net Income Standards).

364.600: Determining the Benefit Level

Once a household has been determined eligible for the Food Stamp Program considering both non-financial and financial eligibility standards, the worker must determine the household's benefit level or monthly allotment.

(A) Household Size 1-8. Refer to Section 364.980, Food Stamp Program Issuance Tables, to find the monthly allotment amount based on the household's monthly net income (which includes cents) and household size. The minimum monthly allotment for one and two person households is \$10.

(B) Household Size Over 8.

- (1) Determine the maximum coupon allotment for the household size by adding \$53 for each person in excess of eight to the maximum coupon allotment for an eight person household.
- (2) Determine the household's monthly net income in accordance with section 364.500 above.
- (3) Multiply the household's monthly net income (with cents included) by 30%. After this calculation, round down to the next whole dollar for amounts from 1 through 49 cents and up to the next whole dollar for amounts of 50 cents or more.
- (4) Subtract this 30% amount from the maximum coupon allotment for the household size. The resulting amount is the household's monthly allotment.

364.700: Assigning Certification Periods

Definite periods of time are established within which households are eligible to receive benefits. At the expiration of the certification period, benefits will be terminated without the right to a pretermination hearing for any household that fails, without good

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- (4) Subtract this 30% amount from the maximum coupon allotment for the household size. The resulting amount is the household's monthly allotment except in the following instances.
- (5) If the calculated amount is \$1, \$3, \$5, the amount must be adjusted upward to \$2, \$4, \$6 respectively.
- (6) If the calculated amount is zero or less the household is ineligible for benefits on the grounds that its net income exceeds the level at which benefits are issued.

364.650: Prorating Initial Months Benefits

A household's benefits for its initial month of certification are based on the day of the month it applies for benefits. The household's full monthly allotment, as calculated in Section 364.600, must be prorated from the date of application to the end of the month.

For prorating benefits the term initial month means:

- (A) The first month for which the household is issued food stamp benefits or;
- (B) The first month for which the household is issued benefits after a period of more than one month during which the household was not certified for participation in the Food Stamp Program.

If benefits could not be provided within 30 days from the date of application because of household delay (Section 361.910), benefits shall be prorated from the date the household completes its certification responsibilities.

A standard 30 day calendar month shall be used to prorate initial months benefits. The worker shall determine the prorated benefit allotment by referring to the Food Stamp Allotment Proration Tables in Section 364.990.

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Definite periods of time are established within which households are eligible to receive benefits. At the expiration of the certification period, benefits will be terminated without the right to a pretermination hearing for any household that fails, without good cause, to timely comply with its responsibilities for recertification (see 106 CMR 366.330).

(A) Conformance With Calendar Months

Certification periods shall conform to calendar months. At initial application, the first month in the certification period is generally the month of application, even if the household's eligibility is not determined until a subsequent month. For example, if a household files an application in January and the application is not processed until February, a six month certification period would include January through June. Upon recertification, the certification period will begin with the month following the last month of the previous certification period.

(B) Length of Certification Periods

Households shall be assigned the longest certification periods possible based on the predictability of the household's circumstances. As a result of anticipating changes, the household's level of benefits for the month of application may differ from its entitlement in subsequent months. The worker shall establish a certification period for the longest period possible over which the household's circumstances can be reasonably anticipated. The household's allotment shall vary month to month within the certification period to reflect changes anticipated at the time of certification, unless the household elects to average income or expenses or both. Households shall be certified for at least three months except as specified in this section.

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364.710: Households Certified for Three Months or Less

Households certified for three months or less shall have the assigned certification period increased by one (1) month if the certification process is completed after the 15th day of the month of application and the household's circumstances warrant the longer certification period. For example, if a household which is eligible for a three-month certification period makes application in June and is not certified until late June or early July, the certification period would include June through September.

(A) Households Experiencing Changes of Circumstances

Households shall be certified for one or two months as appropriate when the household cannot reasonably predict what its circumstances will be in the near future. For example, a household whose primary wage earner has just lost a job but may be reinstated or may begin receiving unemployment compensation within two weeks would be certified for only one or two months.

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(B) Unstable Households. Households shall be certified for one or two months when there is a substantial likelihood of frequent and significant changes in income or household status; for example day laborers and migrant workers during the work season when income is uncertain and subject to extreme fluctuations due to the availability of employment or due to bad weather or other circumstances.

364.720: Households Certified for Longer than Three Months

Certain households shall be assigned certification periods longer than 3 months based on the predictability of change in the household circumstances.

(A) Stable Households. Households shall be certified for up to six months if there is little likelihood of changes in income, deductions, or composition.

(B) Households Not Enumerated. A household in which one or more members have not yet provided a valid Social Security number as a condition of eligibility shall be certified for up to six months.

(C) Unemployable Households. Households consisting entirely of unemployable or elderly persons with very stable income shall be certified for up to 12 months provided other household circumstances are expected to remain stable; for example, social security recipients, SSI recipients, and persons who receive pension or disability payments.

(D) Certain Self-Employed Households. Households whose primary source of income is from self-employment (including self-employed farmers) or from regular farm employment with the same employer, shall be certified for up to 12 months, provided income can be readily predicted and household circumstances are not likely to change. Annual certification periods may be assigned to farm workers who are provided their annual salaries on a scheduled monthly basis which does not change as the amount of work changes.

364.730: Certification Periods for PA Households

PA households (see 106 CMR 365.100 through 365.180) shall be assigned certification periods which expire at the end of the month following the completion of the household's cash assistance redetermination. However, in no event shall such certification periods exceed one year and PA households which have not been recertified shall be sent a separate notice of recertification in the eleventh month.

364.800: Notification Requirements

The Department uses certain standard notification letters. These letters shall be used by all Department staff. No other notification letters may be used in place of or in addition to the letters described below.

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level. The Notice of Increase shall include the following information:

(A) When the change does not result in an increase or a decrease in the household's monthly allotment, the notice shall inform the household that its monthly allotment will remain unchanged.

(B) For changes that result in increased benefits, the notice shall inform the household of the new monthly allotment and of the date the new monthly allotment becomes effective. The notice shall also inform the household of the date by which the change must be verified and the consequences of failure to verify the change.

(C) The household's right to a fair hearing, the telephone number of the food stamp office, and the name of the person to contact for additional information.

364.840: Notice of Food Stamp Termination

A notice of Food Stamp Termination shall be issued to all Food Stamp households. For households certified for three months or longer, notice shall be sent no earlier than the 15th day of the month prior to the last month but prior to the first day of the last month of its certification period. When the Department cannot provide the notice by this date, because the household is certified for two months or less, the notice shall be provided at the time of certification. The Notice of Food Stamp Termination shall contain the following information.

(A) The date the current certification period ends.

(B) The date by which the household must complete its responsibilities for recertification to receive uninterrupted benefits.

(C) The household's right to request an application and have the Department accept an application as long as it is signed and contains a legible name and address.

(D) The household's right to file the application by mail or through an authorized representative.

(E) The address of the office where the application must be filed.

(F) The right of any household consisting only of SSI applicants or recipients to apply for recertification at an SSA office.

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(G) The consequences of failure to comply with the Notice of Food Stamp Termination.

(H) The household's right to a fair hearing if the Department refuses to accept for good cause the household's reason for failure to comply with the Notice of Food Stamp Termination.

364.850: Notice of Change

The Notice of Change, with prepaid postage, shall be provided to all households at initial certification, and whenever a change report form is returned by a household and at recertification, if the household needs a new form. The Notice of Change shall provide the household a space for reporting the changes required in 106 CMR 366.110 (A) and shall contain the following information.

(A) A space for the household to report whether the change shall continue beyond the report month.

(B) The civil and criminal penalties for violations for the Food Stamp Act in understandable terms and in prominent and boldface lettering.

(C) A reminder to the household of its right to claim actual utility costs if its costs exceed the standard.

364.860: Notice of Adverse Action

The Notice of Adverse Action shall be sent to all households prior to terminating or reducing benefits, except as specified in 106 CMR 366.210 to insure timely and adequate advance notice of the proposed action. The Notice of Adverse Action shall contain the following information.

(A) The proposed action;

(B) The reason for the proposed action;

(C) The households right to request a fair hearing;

(D) The telephone number and, if possible, the name of the person to contact for additional information;

(E) The availability of continued benefits and the date by which a hearing request must be filed to ensure such continuation.

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364.880: Fraud Claim Demand Letter

The Fraud Claim Demand Letter shall be sent to households which have been found to have committed fraud by either an administrative fraud hearing or a court of appropriate jurisdiction. The Fraud Claim Demand Letter must be sent even if the household already received a Non-Fraud Claim Demand Letter. The Fraud Claim Demand Letter shall contain the following information.

- (A) The amount owed;
- (B) The reason for the Claim;
- (C) The period of time the claim covers;
- (D) Any offsetting that was done to reduce the claim;
- (E) How the household may pay the claim; and
- (F) The household's right to a fair hearing if the household disagrees with the Department's determination of the amount of the claim.

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364.900: Delivery of Benefits

Eligible households shall be issued an Authorization to Participate (ATP) for each month of eligibility. The ATP can be exchanged for the household's monthly allotment of food stamps at any authorized issuing office. The ATP is valid only for the month of issuance and cannot be negotiated in a subsequent month.

(A) Initial ATP Issuance

- (1) Expedited ATP Issuance. The Department shall issue an expedited ATP to destitute households and zero-net-income households on the same day the household's application is approved under the expedited processing requirements (see 106 CMR 365.800 through 365.890). If the household or its authorized representative is unable to pick up the ATP at the local office, the ATP shall be mailed to the household on the same day the household is certified no later than the latest available mail pick up time in the community.
 - (2) Normal ATP Issuance. The Department shall provide households, not entitled to expedited certification and issuance, an ATP as soon as possible. In order to meet the time standard for processing applications, the Department must provide the applicant an opportunity to participate no later than 30 calendar days after the date the application is filed (see 106 CMR 361.080).
- (B) Supplementary ATP Issuance. The Department shall provide a Supplementary ATP, in addition to the household's monthly ATP, when the household is entitled to increased benefits because of certain changes in the household's circumstances. The conditions of entitlement and the time frames for the delivery of a Supplementary ATP are set forth in 106 CMR 366.120 (A).
- (C) Replacement of Destroyed Stamps. The Department shall replace that portion of a household's monthly food stamp allotment which was destroyed in a natural disaster (e.g., fire, flood) in accordance with the following provisions. Stolen or misplaced food stamps cannot be replaced.

(1) Conditions of Entitlement

- a. The household must report the destruction of the stamps to the appropriate CSAO/WSO within ten days of the incident or within the period of their intended use, whichever is earlier.

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(2) Households Entitled to a Manually Issued Supplementary ATP. An over-the-counter Supplementary ATP shall be issued to households only when the reported change makes the household eligible to receive the full coupon allotment during the month in which the change occurs.

(C) Replacement ATP Issuance: The Department shall provide over-the-counter ATP's in original amounts. The conditions of entitlement for a replacement ATP are:

- (1) the original ATP was issued over-the-counter after the 25th day of the month and was not transacted before the expiration date:
- (2) the original ATP was lost, stolen, never received, or so mutilated as to be unusable and the loss is reported during the period for which the ATP was issued:
- (3) the recipient signs a statement of loss where s/he attests that the information s/her gives is correct and true and that the original ATP, if lost, will be returned to the Department if recovered by the household: or,
- (4) the worker has checked the ATP Issuance Reports, FSP-026 and FSP-027 or the over-the-counter alpha file to be sure the ATP was issued and in cases of non-receipt, has allowed three days beyond the issuance date to allow mail service delays, except in cases where a delay of one or more days will result in undue hardship to the household.

(D) ATP Replacement and Potential Overutilization of Food Stamps

- (1) Each month the Department shall provide a list of all ATP(s) reported lost or stolen from the mail to the Postal Inspection Service and shall advise the Postal Inspection Service if the original ATP is transacted. The Department will assist the Postal Inspection Service with copies of the original and replacement ATP(s) and a copy of the recipient's statement of loss, if requested.
- (2) If a household reports two consecutive mail losses, the Department shall consider other means to deliver ATP(s) to the household.
- (3) When the Overutilization Report (FSP-248) shows that both the original and replacement ATP were cashed, the worker shall initiate a claim determination against the household to recover the amount of the overissuance.

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The period of intended use is: The month the ATP, authorizing the receipt of the stamps, was issued or, for ATP's issued after the 25th of the month, the month the ATP was issued and the following month.

- b. The household must sign a statement in which it attests to the destruction of the stamps, states the original stamps will be returned if recovered, and states it is aware of the penalties for intentional misrepresentation of the facts.
- c. The Department must verify the disaster through a collateral contact, documentation from a community agency (e.g., fire department, Red Cross), or a home visit.

(2) Restrictions on Replacement

- a. Replacement of stamps reported destroyed after receipt may be made only once in a six (6) calendar month period. If in the month of request or in the previous five (5) months the household has already been issued a replacement for destroyed stamps or for an ATP destroyed after receipt, the request must be denied.
- b. The replacement allotment may not exceed the household's monthly food stamp allotment.
- c. For losses of both food stamps and food, the replacement for the combined value of both the food and stamps cannot exceed the household's monthly allotment.

(3) Time Frames for Delivery of Benefits

- a. Destitute and zero net income households (as defined in Section 365.800) shall be issued a replacement ATP on the day of the request.
- b. For all other households, a replacement ATP shall be issued within 10 days of receipt of the request.

(D) Replacement of an ATP Stolen or Destroyed after Receipt.

The Department shall replace an ATP which was received by the household but subsequently stolen or subsequently destroyed in a natural disaster (e.g., fire, flood) in accordance with the following provisions. ATP's lost or misplaced after receipt cannot be replaced.

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(1) Conditions of Entitlement

- a. The household must report the theft or destruction of the ATP to the appropriate CSAO/WSO within 10 days of the incident or within the period of its intended use.

The period of intended use is: The month the ATP was issued or, for ATP's issued after the 25th of the month, the month the ATP was issued and the following month.

- b. The household must sign a statement in which it attests to the theft or destruction of the ATP, states the original ATP will be returned if recovered, and states it is aware of the penalties for intentional misrepresentation of the facts.
- c. The Department must verify the disaster through a collateral contact, documentation from a community agency (e.g., fire department, police department, Red Cross), or a home visit.

(2) Restrictions on Replacement

- a. Replacement of an ATP reported as stolen subsequent to receipt shall be made only once in a six (6) calendar month period. If in the month of request or in the previous five (5) months the household has been issued a replacement for an ATP reported as stolen after receipt, the request for replacement shall be denied.
- b. Replacement of an ATP reported as destroyed shall be made only once in a six (6) calendar month period. If in the month of request or in the previous five (5) months the household has been issued a replacement for an ATP or stamps reported as destroyed, the request for replacement shall be denied.
- c. If both food and an ATP are destroyed in a natural disaster, the replacement for the combined value of both the food and the ATP may not exceed the household's monthly allotment.

(3) Time Frames for Delivery of Benefits

Time frames for issuing the replacement ATP are given in Section 364.900(C).

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(E) Replacement of an ATP Lost or Stolen in the Mail Prior to Receipt

The Department shall replace an ATP reported as stolen or lost in the mail prior to receipt in accordance with the following provisions:

(1) Conditions of Entitlement

- a. The household must report the non-receipt of the ATP to the appropriate CSAO/WSO in the period of its intended use (see Section 364900 (D)).
- b. The household must sign a statement in which it attests that the original ATP will be returned to the Department if recovered, and that it is aware of the penalties for intentional misrepresentation of the facts.

(2) Restrictions on Replacement

Replacements of ATP's reported as lost or stolen from the mail shall be made only twice in a six (6) calendar month period. If the household has already received two replacements for ATP's stolen or lost in the mail in a six (6) month period, including the month of request, the request shall be denied.

(3) Time Frames for Delivery of Benefits

- a. For destitute and zero-net-income households, the Department shall replace the ATP on the third day following the household's normal issuance date. This time period allows for mail service delays. However, if the delay will result in undue hardship to the household, the ATP shall be replaced on the day of request.
- b. For all other households, the replacement ATP shall be issued no more than 10 days after the report of non-delivery.

(4) Additional Provisions

- a. If the household reports the non-delivery of two ATP's in a six (6) month period, the Department shall issue benefits to the household under an alternate issuance system. The placement of a household on an alternate issuance system, and the length of time the household is on this system, is not subject to the fair hearing process.

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- b. The Department shall forward a list of all ATP's reported as lost or stolen in the mail to the Postal Inspection Service each month.

(F) Replacement of ATP's Issued after the 25th of the Month.

The Department shall replace an ATP issued after the 25th day of the month if it was not transacted before the expiration date.

(1) Conditions of Entitlement.

- a. The household must request the replacement in the period of its intended use. See Section 364.900(D) for a definition of the period of intended use.
- b. The household must return the original ATP.

(2) Time Frames for Replacement

The time frames set forth in Section 364.900(C) also apply to the replacement of ATP's issued after the 25th day of the month.

- (G) ATP Issuance After Recertification. Households that timely comply with recertification requirements and are found eligible are entitled to uninterrupted benefits. If it is impossible to mail an ATP by that date, an ATP must be made available for the household to pick up at the local office (see 106 CMR 366.330(B)).
- (H) Mutilated or Improperly Manufactured Stamps. Stamps received by a household that are subsequently mutilated or found to be improperly manufactured must be returned by the household to the food stamp vendor for replacement.
- (I) Replacement of Food Destroyed in a Disaster. A household may be eligible for a replacement of the actual value of food, purchased with food stamps, that was destroyed in a natural disaster. (e.g. fire or flood).
- (1) Conditions of Entitlement
- a. The household must report the loss within ten days of the disaster.
 - b. The Department must verify the disaster through a collateral contact, a community organization (e.g., fire department, Red Cross), or a home visit.

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(E) Stolen or Destroyed Stamps. The Department shall provide a replacement ATP for that portion of a household's allotment which was received but subsequently destroyed in a household disaster such as a fire or flood, or was subsequently stolen. To qualify for a replacement, the household must sign a statement at the food stamp office attesting to the theft or destruction. If the coupons were stolen, the household must also report the theft to the local police and provide a copy of the police report or sufficient information to permit the worker to verify that the theft was reported to the police. The Department shall not issue a replacement allotment to a household which reports that coupons were misplaced.

(F) ATP Issuance After Recertification. Households that timely comply with recertification requirements and are found eligible are entitled to uninterrupted benefits. If it is impossible to mail a machine-issued ATP by that date, an over-the-counter ATP must be issued to the household (see 106 CMR 366.330(B)).

(G) Mutilated or Improperly Manufactured Stamps. Coupons received by a household that are subsequently mutilated or found to be improperly manufactured must be returned by the household to the food stamp vendor for replacement.

364.910: Issuing Identification Cards(A) Requirements

The Department shall provide the individual authorized to transact the household's ATP with a photo identification card. This individual may be either a household member or an authorized representative. When this requirement is effective in a specific area, failure of either the household member or authorized representative to cooperate in the photo identification process shall result in denial or termination of benefits unless one of the exceptions listed in (B) applies. Failure to cooperate is defined as failure to keep two scheduled appointments and/or failure to cooperate in the photo identification process.

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(E) Stolen or Destroyed Stamps. The Department shall provide a replacement ATP for that portion of a household's allotment which was received but subsequently destroyed in a household disaster such as a fire or flood, or was subsequently stolen. To qualify for a replacement, the household must sign a statement at the food stamp office attesting to the theft or destruction. If the coupons were stolen, the household must also report the theft to the local police and provide a copy of the police report or sufficient information to permit the worker to verify that the theft was reported to the police. The Department shall not issue a replacement allotment to a household which reports that coupons were misplaced.

(F) ATP Issuance After Recertification. Households that timely comply with recertification requirements and are found eligible are entitled to uninterrupted benefits. If it is impossible to mail a machine-issued ATP by that date, an over-the-counter ATP must be issued to the household (see 106 CMR 366.330(B)).

(G) Mutilated or Improperly Manufactured Stamps. Coupons received by a household that are subsequently mutilated or found to be improperly manufactured must be returned by the household to the food stamp vendor for replacement.

364.910: Issuing Identification Cards(A) Requirements

(1) The Department shall provide the individual authorized to transact the household's ATP with a photo identification card. This individual may be either a household member or an authorized representative. When a card is issued to an authorized representative it shall contain the name and Social Security number of the individual in whose name the ATP is issued and the authorized representative's name, photograph and signature. If requested by the individual in whose name the ATP is issued, a photo identification card may be issued to both him/her and an authorized representative.

(2) Households which are entitled to expedited issuance shall receive a temporary identification card. A photo identification card shall be obtained prior to issuance of the household's next allotment.

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(3) If neither the household member nor the authorized representative is able to obtain stamps, the household may designate an emergency authorized representative. The emergency authorized representative will be issued a temporary identification card which shall be valid for five (5) calendar days. To obtain this card, the emergency authorized representative must:

- a. Be designated by the household on the ATP as the emergency authorized representative;
- b. Sign the ATP in the presence of the household member; and
- c. Bring the ATP and the household's, or authorized representative's, photo identification card to the office.

(B) Exceptions

(1) In the situations outlined below, identification cards containing the photograph of a household member are not required. The Department shall issue these households an identification card annotated to show that an exception to the photograph requirement has been granted.

- a. Households whose religion does not allow them to be photographed. The Department shall require such a household to provide a signed statement that their religious beliefs do not allow them to be photographed. The statement shall specify the biblical or other basis for their religious belief and shall be filed in the case record.
- b. Households certified at Social Security Administration Offices under the SSI-Food Stamp joint processing rules. If the appropriate household member, or its authorized representative, reports to the office for recertification, he/she shall be required to obtain a photo identification card.
- c. Households certified by out-of-office interviews (see Section 361.510: Waiver of the Office Interview). If the appropriate household member, or its authorized representative, is in the office for any reason the Department shall attempt to issue a photo identification card.

(2) Residents of drug/alcoholic treatment and rehabilitation programs will not be issued an identification card. The facility's authorized representative shall be issued a photo identification card. If a resident leaves the facility during the month, he/she shall be issued a temporary identification card, if necessary.

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(2) Residents of drug/alcoholic treatment and rehabilitation programs will not be issued an identification card. The facility's authorized representative shall be issued a photo identification card. If a resident leaves the facility during the month, he/she shall be issued a temporary identification card, if necessary.

364.920: Frequency of Issuance

ID cards shall normally be issued only at the time of initial certification. Replacements shall be authorized only in instances of loss, mutilation, destruction or changes in persons authorized to obtain or use coupons.

364.930: Mail Issuance of ID Cards

ID cards delivered to households by mail shall not be mailed in the same envelope with an ATP or coupons.

364.940: ID Cards for Special Households

Specially marked ID cards shall be issued as follows:

(A) Delivered Meals

Households in which one or more persons are determined to be eligible to use food stamps in payment for delivered meals, and express an intent to do so will be issued an ID card which is conspicuously marked with the letter "M". Participants should be requested to advise the delivered meal service that they plan to use food stamps to purchase delivered meals. Persons who meet the eligibility requirements for delivered meals for only a temporary period, such as while convalescing, will have an expiration date on their ID card.

(B) Communal Dining

(1) In those areas where restaurants are authorized to accept food stamps, any household eligible for and interested in using communal dining facilities shall receive an ID card marked with the letters "CD".

(2) Any household eligible for and interested in using delivered meal services shall receive an ID card marked with the letter "M".

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Households which are entitled to expedited issuance shall receive a temporary identification card. A photo identification card shall be obtained prior to issuance of the household's next allotment.

(B) Exceptions

(1) In the situations outlined below, identification cards containing the photograph of a household member are not required. The Department shall issue these households an identification card annotated to show that an exception to the photograph requirement has been granted.

a. Households whose religion does not allow them to be photographed. The Department shall require such a household to provide a signed statement that their religious beliefs do not allow them to be photographed. The statement shall specify the biblical or other basis for their religious belief.

b. Households certified at Social Security Administration Offices under the SSI-Food Stamp joint processing rules.

c. Households certified by out-of-office interviews (see Section 361.510: Waiver of the Office Interview).

(2) Residents of drug/alcoholic treatment and rehabilitation programs will not be issued an identification card. The facility's authorized representative shall be issued a photo identification card.

364.920: Frequency of Issuance

ID cards shall normally be issued only at the time of initial certification. When the requirements of Section 364.910 become effective in specific areas, ID cards shall be issued to current recipients. Replacements shall be authorized only in instances of loss, mutilation, destruction or changes in persons authorized to obtain or use coupons.

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364.950: Maximum Gross Monthly Income Standards*

<u>Household Size</u>	<u>Maximum Allowable Gross Monthly Income</u>
1	\$ 507.00
2	674.00
3	841.00
4	1008.00
5	1175.00
6	1342.00
7	1508.00
8	1675.00
For each additional member	add 167.00

* See Section 364.360. These standards apply to all households except those with an elderly/disabled member as defined in Section 364.550.

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364.960:

STANDARD UTILITY ALLOWANCES

Eff.

FIRST MONTH OF CERTIFICATION	NUMBER OF MONTHS THAT HOUSEHOLD IS CERTIFIED											
	1	2	3	4	5	6	7	8	9	10	11	12
JANUARY	406	348	323	281	246	216	194	178	167	168	176	193
FEBRUARY	290	281	239	207	179	159	145	137	141	153	173	193
MARCH	273	214	179	151	133	121	115	123	138	162	184	193
APRIL	156	132	110	98	91	89	101	121	149	175	185	193
MAY	108	87	79	75	76	92	116	149	177	188	196	193
JUNE	66	64	64	67	89	117	154	186	197	205	200	193
JULY	61	63	68	94	127	169	203	214	220	214	204	193
AUGUST	64	71	105	143	191	226	235	240	231	218	205	193
SEPTEMBER	78	126	170	222	259	264	265	252	236	219	204	193
OCTOBER	175	216	270	304	301	297	276	255	234	217	203	193
NOVEMBER	258	318	347	333	321	293	267	242	222	206	194	193
DECEMBER	379	392	358	337	300	268	240	217	200	188	187	193

INSTRUCTIONS FOR TABLE USE

1. Find the first month of the certification period in the first column.
2. Read across until you find the dollar figure for the number of months in the certification period. This dollar figure is the standard utility allowance.
3. Add this dollar figure to other shelter expenses to arrive at total shelter expenses.

Trans. by S.L. 588

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364.970: Maximum Allowable Monthly Net Income Standards*Household SizeMaximum Allowable
Monthly Amount

1	\$ 390.00
2	519.00
3	647.00
4	775.00
5	904.00
6	1032.00
7	1160.00
8	1289.00
For each additional member	add 129.00

* Apply only to households with an elderly/disabled member as defined in Section 364.550.

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
281.67 - 284.99	10	43	98	148	192	247	282	334
285.00 - 288.33	10	42	97	147	191	246	281	333
288.34 - 291.66	10	41	96	146	190	245	280	332
291.67 - 294.99	10	40	95	145	189	244	279	331
295.00 - 298.33	10	39	94	144	188	243	278	330
298.34 - 301.66	10	38	93	143	187	242	277	329
301.67 - 304.99	10	37	92	142	186	241	276	328
305.00 - 308.33	10	36	91	141	185	240	275	327
308.34 - 311.66	10	35	90	140	184	239	274	326
311.67 - 314.99	10	34	89	139	183	238	273	325
315.00 - 318.33	10	33	88	138	182	237	272	324
318.34 - 321.66	10	32	87	137	181	236	271	323
321.67 - 324.99	10	31	86	136	180	235	270	322
325.00 - 328.33	10	30	85	135	179	234	269	321
328.34 - 331.66	10	29	84	134	178	233	268	320
331.67 - 334.99	10	28	83	133	177	232	267	319
335.00 - 338.33	10	27	82	132	176	231	266	318
338.34 - 341.66	10	26	81	131	175	230	265	317
341.67 - 344.99	10	25	80	130	174	229	264	316
345.00 - 348.33	10	24	79	129	173	228	263	315
348.34 - 351.66	10	23	78	128	172	227	262	314
351.67 - 354.99	10	22	77	127	171	226	261	313
355.00 - 358.33	10	21	76	126	170	225	260	312
358.34 - 361.66	10	20	75	125	169	224	259	311
361.67 - 364.99	10	19	74	124	168	223	258	310
365.00 - 368.33	10	18	73	123	167	222	257	309
368.34 - 371.66	10	17	72	122	166	221	256	308
371.67 - 374.99	10	16	71	121	165	220	255	307
375.00 - 378.33	10	15	70	120	164	219	254	306
378.34 - 381.66	10	14	69	119	163	218	253	305

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons	
.00 -	1.66	*70	*128	*183	*233	*277	*332	*367	*419
1.67 -	4.99	69	127	182	232	276	331	366	418
5.00 -	8.33	68	126	181	231	275	330	365	417
8.34 -	11.66	67	125	180	230	274	329	364	416
11.67 -	14.99	66	124	179	229	273	328	363	415
15.00 -	18.33	65	123	178	228	272	327	362	414
18.34 -	21.66	64	122	177	227	271	326	361	413
21.67 -	24.99	63	121	176	226	270	325	360	412
25.00 -	28.33	62	120	175	225	269	324	359	411
28.34 -	31.66	61	119	174	224	268	323	358	410
31.67 -	34.99	60	118	173	223	267	322	357	409
35.00 -	38.33	59	117	172	222	266	321	356	408
38.34 -	41.66	58	116	171	221	265	320	355	407
41.67 -	44.99	57	115	170	220	264	319	354	406
45.00 -	48.33	56	114	169	219	263	318	353	405
48.34 -	51.66	55	113	168	218	262	317	352	404
51.67 -	54.99	54	112	167	217	261	316	351	403
55.00 -	58.33	53	111	166	216	260	315	350	402
58.34 -	61.66	52	110	165	215	259	314	349	401
61.67 -	64.99	51	109	164	214	258	313	348	400
65.00 -	68.33	50	108	163	213	257	312	347	399
68.34 -	71.66	49	107	162	212	256	311	346	398
71.67 -	74.99	48	106	161	211	255	310	345	397
75.00 -	78.33	47	105	160	210	254	309	344	396
78.34 -	81.66	46	104	159	209	253	308	343	395

*MAXIMUM COUPON ALLOTMENT FOR THE HOUSEHOLD SIZE

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
84 - 86	45	103	158	208	252	307	342	394
87 - 89	44	102	157	207	251	306	341	393
90 - 93	43	101	156	206	250	305	340	392
94 - 96	42	100	155	205	249	304	339	391
97 - 99	41	99	154	204	248	303	338	390
100 - 103	40	98	153	203	247	302	337	389
104 - 106	39	97	152	202	246	301	336	388
107 - 109	38	96	151	201	245	300	335	387
110 - 113	37	95	150	200	244	299	334	386
114 - 116	36	94	149	199	243	298	333	385
117 - 119	35	93	148	198	242	297	332	384
120 - 123	34	92	147	197	241	296	331	383
124 - 126	33	91	146	196	240	295	330	382
127 - 129	32	90	145	195	239	294	329	381
130 - 133	31	89	144	194	238	293	328	380
134 - 136	30	88	143	193	237	292	327	379
137 - 139	29	87	142	192	236	291	326	378
140 - 143	28	86	141	191	235	290	325	377
144 - 146	27	85	140	190	234	289	324	376
147 - 149	26	84	139	189	233	288	323	375
150 - 153	25	83	138	188	232	287	322	374
154 - 156	24	82	137	187	231	286	321	373
157 - 159	23	81	136	186	230	285	320	372
160 - 163	22	80	135	185	229	284	319	371
164 - 166	21	79	134	184	228	283	318	370
167 - 169	20	78	133	183	227	282	317	369
170 - 173	19	77	132	182	226	281	316	368
174 - 176	18	76	131	181	225	280	315	367
177 - 179	17	75	130	180	224	279	314	366
180 - 183	16	74	129	179	223	278	313	365

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons	
84 -	86	45	103	158	208	252	307	342	394
87 -	89	44	102	157	207	251	306	341	393
90 -	93	43	101	156	206	250	305	340	392
94 -	96	42	100	155	205	249	304	339	391
97 -	99	41	99	154	204	248	303	338	390
100 -	103	40	98	153	203	247	302	337	389
104 -	106	39	97	152	202	246	301	336	388
107 -	109	38	96	151	201	245	300	335	387
110 -	113	37	95	150	200	244	299	334	386
114 -	116	36	94	149	199	243	298	333	385
117 -	119	35	93	148	198	242	297	332	384
120 -	123	34	92	147	197	241	296	331	383
124 -	126	33	91	146	196	240	295	330	382
127 -	129	32	90	145	195	239	294	329	381
130 -	133	31	89	144	194	238	293	328	380
134 -	136	30	88	143	193	237	292	327	379
137 -	139	29	87	142	192	236	291	326	378
140 -	143	28	86	141	191	235	290	325	377
144 -	146	27	85	140	190	234	289	324	376
147 -	149	26	84	139	189	233	288	323	375
150 -	153	25	83	138	188	232	287	322	374
154 -	156	24	82	137	187	231	286	321	373
157 -	159	23	81	136	186	230	285	320	372
160 -	163	22	80	135	185	229	284	319	371
164 -	166	21	79	134	184	228	283	318	370
167 -	169	20	78	133	183	227	282	317	369
170 -	173	19	77	132	182	226	281	316	368
174 -	176	18	76	131	181	225	280	315	367
177 -	179	17	75	130	180	224	279	314	366
180 -	183	16	74	129	179	223	278	313	365

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COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
81.67 - 84.99	45	103	158	208	252	307	342	394
85.00 - 88.33	44	102	157	207	251	306	341	393
88.34 - 91.66	43	101	156	206	250	305	340	392
91.67 - 94.99	42	100	155	205	249	304	339	391
95.00 - 98.33	41	99	154	204	248	303	338	390
98.34 - 101.66	40	98	153	203	247	302	337	389
101.67 - 104.99	39	97	152	202	246	301	336	388
105.00 - 108.33	38	96	151	201	245	300	335	387
108.34 - 111.66	37	95	150	200	244	299	334	386
111.67 - 114.99	36	94	149	199	243	298	333	385
115.00 - 118.33	35	93	148	198	242	297	332	384
118.34 - 121.66	34	92	147	197	241	296	331	383
121.67 - 124.99	33	91	146	196	240	295	330	382
125.00 - 128.33	32	90	145	195	239	294	329	381
128.34 - 131.66	31	89	144	194	238	293	328	380
131.67 - 134.99	30	88	143	193	237	292	327	379
135.00 - 138.33	29	87	142	192	236	291	326	378
138.34 - 141.66	28	86	141	191	235	290	325	377
141.67 - 144.99	27	85	140	190	234	289	324	376
145.00 - 148.33	26	84	139	189	233	288	323	375
148.34 - 151.66	25	83	138	188	232	287	322	374
151.67 - 154.99	24	82	137	187	231	286	321	373
155.00 - 158.33	23	81	136	186	230	285	320	372
158.34 - 161.66	22	80	135	185	229	284	319	371
161.67 - 164.99	21	79	134	184	228	283	318	370
165.00 - 168.33	20	78	133	183	227	282	317	369
168.34 - 171.66	19	77	132	182	226	281	316	368
171.67 - 174.99	18	76	131	181	225	280	315	367
175.00 - 178.33	17	75	130	180	224	279	314	366
178.34 - 181.66	16	74	129	179	223	278	313	365

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
184 -	15	73	128	178	222	277	312	364
187 -	14	72	127	177	221	276	311	363
190 -	13	71	126	176	220	275	310	362
194 -	12	70	125	175	219	274	309	361
197 -	11	69	124	174	218	273	308	360
200 -	10	68	123	173	217	272	307	359
204 -	10	67	122	172	216	271	306	358
207 -	10	66	121	171	215	270	305	357
210 -	10	65	120	170	214	269	304	356
214 -	10	64	119	169	213	268	303	355
217 -	10	63	118	168	212	267	302	354
220 -	10	62	117	167	211	266	301	353
224 -	10	61	116	166	210	265	300	352
227 -	10	60	115	165	209	264	299	351
230 -	10	59	114	164	208	263	298	350
234 -	10	58	113	163	207	262	297	349
237 -	10	57	112	162	206	261	296	348
240 -	10	56	111	161	205	260	295	347
244 -	10	55	110	160	204	259	294	346
247 -	10	54	109	159	203	258	293	345
250 -	10	53	108	158	202	257	292	344
254 -	10	52	107	157	201	256	291	343
257 -	10	51	106	156	200	255	290	342
260 -	10	50	105	155	199	254	289	341
264 -	10	49	104	154	198	253	288	340
267 -	10	48	103	153	197	252	287	339
270 -	10	47	102	152	196	251	286	338
274 -	10	46	101	151	195	250	285	337
277 -	10	45	100	150	194	249	284	336
280 -	10	44	99	149	193	248	283	335

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COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
184 - 186	15	73	128	178	222	277	312	364
187 - 189	14	72	127	177	221	276	311	363
190 - 193	13	71	126	176	220	275	310	362
194 - 196	12	70	125	175	219	274	309	361
197 - 199	11	69	124	174	218	273	308	360
200 - 203	10	68	123	173	217	272	307	359
204 - 206	10	67	122	172	216	271	306	358
207 - 209	10	66	121	171	215	270	305	357
210 - 213	10	65	120	170	214	269	304	356
214 - 216	10	64	119	169	213	268	303	355
217 - 219	10	63	118	168	212	267	302	354
220 - 223	10	62	117	167	211	266	301	353
224 - 226	10	61	116	166	210	265	300	352
227 - 229	10	60	115	165	209	264	299	351
230 - 233	10	59	114	164	208	263	298	350
234 - 236	10	58	113	163	207	262	297	349
237 - 239	10	57	112	162	206	261	296	348
240 - 243	10	56	111	161	205	260	295	347
244 - 246	10	55	110	160	204	259	294	346
247 - 249	10	54	109	159	203	258	293	345
250 - 253	10	53	108	158	202	257	292	344
254 - 256	10	52	107	157	201	256	291	343
257 - 259	10	51	106	156	200	255	290	342
260 - 263	10	50	105	155	199	254	289	341
264 - 266	10	49	104	154	198	253	288	340
267 - 269	10	48	103	153	197	252	287	339
270 - 273	10	47	102	152	196	251	286	338
274 - 276	10	46	101	151	195	250	285	337
277 - 279	10	45	100	150	194	249	284	336
280 - 283	10	44	99	149	193	248	283	335

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COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
181.67 - 184.99	15	73	128	178	222	277	312	364
185.00 - 188.33	14	72	127	177	221	276	311	363
188.34 - 191.66	13	71	126	176	220	275	310	362
191.67 - 194.99	12	70	125	175	219	274	309	361
195.00 - 198.33	11	69	124	174	218	273	308	360
198.34 - 201.66	10	68	123	173	217	272	307	359
201.67 - 204.99	10	67	122	172	216	271	306	358
205.00 - 208.33	10	66	121	171	215	270	305	357
208.34 - 211.66	10	65	120	170	214	269	304	356
211.67 - 214.99	10	64	119	169	213	268	303	355
215.00 - 218.33	10	63	118	168	212	267	302	354
218.34 - 221.66	10	62	117	167	211	266	301	353
221.67 - 224.99	10	61	116	166	210	265	300	352
225.00 - 228.33	10	60	115	165	209	264	299	351
228.34 - 231.66	10	59	114	164	208	263	298	350
231.67 - 234.99	10	58	113	163	207	262	297	349
235.00 - 238.33	10	57	112	162	206	261	296	348
238.34 - 241.66	10	56	111	161	205	260	295	347
241.67 - 244.99	10	55	110	160	204	259	294	346
245.00 - 248.33	10	54	109	159	203	258	293	345
248.34 - 251.66	10	53	108	158	202	257	292	344
251.67 - 254.99	10	52	107	157	201	256	291	343
255.00 - 258.33	10	51	106	156	200	255	290	342
258.34 - 261.66	10	50	105	155	199	254	289	341
261.67 - 264.99	10	49	104	154	198	253	288	340
265.00 - 268.33	10	48	103	153	197	252	287	339
268.34 - 271.66	10	47	102	152	196	251	286	338
271.67 - 274.99	10	46	101	151	195	250	285	337
275.00 - 278.33	10	45	100	150	194	249	284	336
278.34 - 281.66	10	44	99	149	193	248	283	335

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COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
284 -	10	43	98	148	192	247	282	334
287 -	10	42	97	147	191	246	281	333
290 -	10	41	96	146	190	245	280	332
294 -	10	40	95	145	189	244	279	331
297 -	10	39	94	144	188	243	278	330
300 -	10	38	93	143	187	242	277	329
304 -	10	37	92	142	186	241	276	328
307 -	10	36	91	141	185	240	275	327
310 -	10	35	90	140	184	239	274	326
314 -	10	34	89	139	183	238	273	325
317 -		33	88	138	182	237	272	324
320 -		32	87	137	181	236	271	323
324 -		31	86	136	180	235	270	322
327 -		30	85	135	179	234	269	321
330 -		29	84	134	178	233	268	320
334 -		28	83	133	177	232	267	319
337 -		27	82	132	176	231	266	318
340 -		26	81	131	175	230	265	317
344 -		25	80	130	174	229	264	316
347 -		24	79	129	173	228	263	315
350 -		23	78	128	172	227	262	314
354 -		22	77	127	171	226	261	313
357 -		21	76	126	170	225	260	312
360 -		20	75	125	169	224	259	311
364 -		19	74	124	168	223	258	310
367 -		18	73	123	167	222	257	309
370 -		17	72	122	166	221	256	308
374 -		16	71	121	165	220	255	307
377 -		15	70	120	164	219	254	306
380 -		14	69	119	163	218	253	305

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COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
284 - 286	10	43	98	148	192	247	282	334
287 - 289	10	42	97	147	191	246	281	333
290 - 293	10	41	96	146	190	245	280	332
294 - 296	10	40	95	145	189	244	279	331
297 - 299	10	39	94	144	188	243	278	330
300 - 303	10	38	93	143	187	242	277	329
304 - 306	10	37	92	142	186	241	276	328
307 - 309	10	36	91	141	185	240	275	327
310 - 313	10	35	90	140	184	239	274	326
314 - 316	10	34	89	139	183	238	273	325
317 - 319	10	33	88	138	182	237	272	324
320 - 323	10	32	87	137	181	236	271	323
324 - 326	10	31	86	136	180	235	270	322
327 - 329	10	30	85	135	179	234	269	321
330 - 333	10	29	84	134	178	233	268	320
334 - 336	10	28	83	133	177	232	267	319
337 - 339	10	27	82	132	176	231	266	318
340 - 343	10	26	81	131	175	230	265	317
344 - 346	10	25	80	130	174	229	264	316
347 - 349	10	24	79	129	173	228	263	315
350 - 353	10	23	78	128	172	227	262	314
354 - 356	10	22	77	127	171	226	261	313
357 - 359	10	21	76	126	170	225	260	312
360 - 363**	10	20	75	125	169	224	259	311
364 - 366		19	74	124	168	223	258	310
367 - 369		18	73	123	167	222	257	309
370 - 373		17	72	122	166	221	256	308
374 - 376		16	71	121	165	220	255	307
377 - 379		15	70	120	164	219	254	306
380 - 383		14	69	119	163	218	253	305

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

Trans. by S.L. 559

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
281.67 - 284.99	10	43	98	148	192	247	282	334
285.00 - 288.33	10	42	97	147	191	246	281	333
288.34 - 291.66	10	41	96	146	190	245	280	332
291.67 - 294.99	10	40	95	145	189	244	279	331
295.00 - 298.33	10	39	94	144	188	243	278	330
298.34 - 301.66	10	38	93	143	187	242	277	329
301.67 - 304.99	10	37	92	142	186	241	276	328
305.00 - 308.33	10	36	91	141	185	240	275	327
308.34 - 311.66	10	35	90	140	184	239	274	326
311.67 - 314.99	10	34	89	139	183	238	273	325
315.00 - 318.33	10	33	88	138	182	237	272	324
318.34 - 321.66	10	32	87	137	181	236	271	323
321.67 - 324.99	10	31	86	136	180	235	270	322
325.00 - 328.33	10	30	85	135	179	234	269	321
328.34 - 331.66	10	29	84	134	178	233	268	320
331.67 - 334.99	10	28	83	133	177	232	267	319
335.00 - 338.33	10	27	82	132	176	231	266	318
338.34 - 341.66	10	26	81	131	175	230	265	317
341.67 - 344.99	10	25	80	130	174	229	264	316
345.00 - 348.33	10	24	79	129	173	228	263	315
348.34 - 351.66	10	23	78	128	172	227	262	314
351.67 - 354.99	10	22	77	127	171	226	261	313
355.00 - 358.33	10	21	76	126	170	225	260	312
358.34 - 361.66**	10	20	75	125	169	224	259	311
361.67 - 364.99	10	19	74	124	168	223	258	310
365.00 - 368.33	10	18	73	123	167	222	257	309
368.34 - 371.66	10	17	72	122	166	221	256	308
371.67 - 374.99	10	16	71	121	165	220	255	307
375.00 - 378.33	10	15	70	120	164	219	254	306
378.34 - 381.66	10	14	69	119	163	218	253	305

** Check Maximum Net Income Standards (Section 364.970) - Net Income Households only

Gross Income Households Only

Trans. by S.L. 529

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
384 - 386		13	68	118	162	217	252	304
387 - 389		12	67	117	161	216	251	303
390 - 393		11	66	116	160	215	250	302
394 - 396		10	65	115	159	214	249	301
397 - 399		10	64	114	158	213	248	300
400 - 403		10	63	113	157	212	247	299
404 - 406		10	62	112	156	211	246	298
407 - 409		10	61	111	155	210	245	297
410 - 413		10	60	110	154	209	244	296
414 - 416		10	59	109	153	208	243	295
417 - 419**		10	58	108	152	207	242	294
420 - 423			57	107	151	206	241	293
424 - 426			56	106	150	205	240	292
427 - 429			55	105	149	204	239	291
430 - 433			54	104	148	203	238	290
434 - 436			53	103	147	202	237	289
437 - 439			52	102	146	201	236	288
440 - 443			51	101	145	200	235	287
444 - 446			50	100	144	199	234	286
447 - 449			49	99	143	198	233	285
450 - 453			48	98	142	197	232	284
454 - 456			47	97	141	196	231	283
457 - 459			46	96	140	195	230	282
460 - 463			45	95	139	194	229	281
464 - 466			44	94	138	193	228	280
467 - 469			43	93	137	192	227	279
470 - 473			42	92	136	191	226	278
474 - 476			41	91	135	190	225	277
477 - 479			40	90	134	189	224	276
480 - 483			39	89	133	188	223	275

** Check Maximum Allowable Monthly Net Income Standards - section 364.970

Trans. by S.L. 543

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Flve Persons	Six Persons	Seven Persons	Flight Persons
384 - 386		13	68	118	162	217	252	304
387 - 389		12	67	117	161	216	251	303
390 - 393		11	66	116	160	215	250	302
394 - 396		10	65	115	159	214	249	301
397 - 399		10	64	114	158	213	248	300
400 - 403		10	63	113	157	212	247	299
404 - 406		10	62	112	156	211	246	298
407 - 409		10	61	111	155	210	245	297
410 - 413		10	60	110	154	209	244	296
414 - 416		10	59	109	153	208	243	295
417 - 419		10	58	108	152	207	242	294
420 - 423		10	57	107	151	206	241	293
424 - 426		10	56	106	150	205	240	292
427 - 429		10	55	105	149	204	239	291
430 - 433		10	54	104	148	203	238	290
434 - 436		10	53	103	147	202	237	289
437 - 439		10	52	102	146	201	236	288
440 - 443		10	51	101	145	200	235	287
444 - 446		10	50	100	144	199	234	286
447 - 449		10	49	99	143	198	233	285
450 - 453		10	48	98	142	197	232	284
454 - 456		10	47	97	141	196	231	283
457 - 459		10	46	96	140	195	230	282
460 - 463		10	45	95	139	194	229	281
464 - 466		10	44	94	138	193	228	280
467 - 469		10	43	93	137	192	227	279
470 - 473		10	42	92	136	191	226	278
474 - 476**		10	41	91	135	190	225	277
477 - 479			40	90	134	189	224	276
480 - 483			39	89	133	188	223	275

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

Trans. by S.L. 588

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
381.67 - 384.99	10	13	68	118	162	217	252	304
385.00 - 388.33	10	12	67	117	161	216	251	303
388.34 - 391.66**10	10	11	66	116	160	215	250	302
391.67 - 394.99	10	10	65	115	159	214	249	301
395.00 - 398.33	10	10	64	114	158	213	248	300
398.34 - 401.66	10	10	63	113	157	212	247	299
401.67 - 404.99	10	10	62	112	156	211	246	298
405.00 - 408.33	10	10	61	111	155	210	245	297
408.34 - 411.66	10	10	60	110	154	209	244	296
411.67 - 414.99	10	10	59	109	153	208	243	295
415.00 - 418.33	10	10	58	108	152	207	242	294
418.34 - 421.66	10	10	57	107	151	206	241	293
421.67 - 424.99	10	10	56	106	150	205	240	292
425.00 - 428.33	10	10	55	105	149	204	239	291
428.34 - 431.66	10	10	54	104	148	203	238	290
431.67 - 434.99	10	10	53	103	147	202	237	289
435.00 - 438.33	10	10	52	102	146	201	236	288
438.34 - 441.66	10	10	51	101	145	200	235	287
441.67 - 444.99	10	10	50	100	144	199	234	286
445.00 - 448.33	10	10	49	99	143	198	233	285
448.34 - 451.66	10	10	48	98	142	197	232	284
451.67 - 454.99	10	10	47	97	141	196	231	283
455.00 - 458.33	10	10	46	96	140	195	230	282
458.34 - 461.66	10	10	45	95	139	194	229	281
461.67 - 464.99	10	10	44	94	138	193	228	280
465.00 - 468.33	10	10	43	93	137	192	227	279
468.34 - 471.66	10	10	42	92	136	191	226	278
471.67 - 474.99	10	10	41	91	135	190	225	277
475.00 - 478.33	10	10	40	90	134	189	224	276
478.34 - 481.66	10	10	39	89	133	188	223	275

** Check Maximum Net Income Standards (Section 364.970) - Net Income Households Only

Gross Income Households Only

Trans. by S.L. 529

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
484 - 486			38	88	132	187	222	274
487 - 489			37	87	131	186	221	273
490 - 493			36	86	130	185	220	272
494 - 496			35	85	129	184	219	271
497 - 499			34	84	128	183	218	270
500 - 503			33	83	127	182	217	269
504 - 506			32	82	126	181	216	268
507 - 509			31	81	125	180	215	267
510 - 513			30	80	124	179	214	266
514 - 516			29	79	123	178	213	265
517 - 519			28	78	122	177	212	264
520 - 523**			27	77	121	176	211	263
524 - 526				76	120	175	210	262
527 - 529				75	119	174	209	261
530 - 533				74	118	173	208	260
534 - 536				73	117	172	207	259
537 - 539				72	116	171	206	258
540 - 543				71	115	170	205	257
544 - 546				70	114	169	204	256
547 - 549				69	113	168	203	255
550 - 553				68	112	167	202	254
554 - 556				67	111	166	201	253
557 - 559				66	110	165	200	252
560 - 563				65	109	164	199	251
564 - 566				64	108	163	198	250
567 - 569				63	107	162	197	249
570 - 573				62	106	161	196	248
574 - 576				61	105	160	195	247
577 - 579				60	104	159	194	246
580 - 583				59	103	158	193	245

** Check Maximum Allowable Monthly Net Income Standards - section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
484 - 486	38	88	132	187	222	274		
487 - 489	37	87	131	186	221	273		
490 - 493	36	86	130	185	220	272		
494 - 496	35	85	129	184	219	271		
497 - 499	34	84	128	183	218	270		
500 - 503	33	83	127	182	217	269		
504 - 506	32	82	126	181	216	268		
507 - 509	31	81	125	180	215	267		
510 - 513	30	80	124	179	214	266		
514 - 516	29	79	123	178	213	265		
517 - 519	28	78	122	177	212	264		
520 - 523	27	77	121	176	211	263		
524 - 526	26	76	120	175	210	262		
527 - 529	25	75	119	174	209	261		
530 - 533	24	74	118	173	208	260		
534 - 536	23	73	117	172	207	259		
537 - 539	22	72	116	171	206	258		
540 - 543	21	71	115	170	205	257		
544 - 546	20	70	114	169	204	256		
547 - 549	19	69	113	168	203	255		
550 - 553	18	68	112	167	202	254		
554 - 556	17	67	111	166	201	253		
557 - 559	16	66	110	165	200	252		
560 - 563	15	65	109	164	199	251		
564 - 566	14	64	108	163	198	250		
567 - 569	13	63	107	162	197	249		
570 - 573	12	62	106	161	196	248		
574 - 576	11	61	105	160	195	247		
577 - 579	10	60	104	159	194	246		
580 - 583	9	59	103	158	193	245		

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
481.67 - 484.99		10	38	88	132	187	222	274
485.00 - 488.33		10	37	87	131	186	221	273
488.34 - 491.66		10	36	86	130	185	220	272
491.67 - 494.99		10	35	85	129	184	219	271
495.00 - 498.33		10	34	84	128	183	218	270
498.34 - 501.66	10	33	83	127	182	217	269	
501.67 - 504.99	10	32	82	126	181	216	268	
505.00 - 508.33	10	31	81	125	180	215	267	
508.34 - 511.66	10	30	80	124	179	214	266	
511.67 - 514.99	10	29	79	123	178	213	265	
515.00 - 518.33	10	28	78	122	177	212	264	
518.34 - 521.66**	10	27	77	121	176	211	263	
521.67 - 524.99	10	26	76	120	175	210	262	
525.00 - 528.33	10	25	75	119	174	209	261	
528.34 - 531.66	10	24	74	118	173	208	260	
531.67 - 534.99	10	23	73	117	172	207	259	
535.00 - 538.33	10	22	72	116	171	206	258	
538.34 - 541.66	10	21	71	115	170	205	257	
541.67 - 544.99	10	20	70	114	169	204	256	
545.00 - 548.33	10	19	69	113	168	203	255	
548.34 - 551.66	10	18	68	112	167	202	254	
551.67 - 554.99	10	17	67	111	166	201	253	
555.00 - 558.33	10	16	66	110	165	200	252	
558.34 - 561.66	10	15	65	109	164	199	251	
561.67 - 564.99	10	14	64	108	163	198	250	
565.00 - 568.33	10	13	63	107	162	197	249	
568.34 - 571.66	10	12	62	106	161	196	248	
571.67 - 574.99	10	11	61	105	160	195	247	
575.00 - 578.33	10	10	60	104	159	194	246	
578.34 - 581.66	10	9	59	103	158	193	245	

** Check Maximum Net Income Standards (Section 364.970) - Net Income Households Only

Gross Income Households Only

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
584 - 586				58	102	157	192	244
587 - 589				57	101	156	191	243
590 - 593				56	100	155	190	242
594 - 596				55	99	154	189	241
597 - 599				54	98	153	188	240
600 - 603				53	97	152	187	239
604 - 606				52	96	151	186	238
607 - 609				51	95	150	185	237
610 - 613				50	94	149	184	236
614 - 616				49	93	148	183	235
617 - 619				48	92	147	182	234
620 - 623**				47	91	146	181	233
624 - 626					90	145	180	232
627 - 629					89	144	179	231
630 - 633					88	143	178	230
634 - 636					87	142	177	229
637 - 639					86	141	176	228
640 - 643					85	140	175	227
644 - 646					84	139	174	226
647 - 649					83	138	173	225
650 - 653					82	137	172	224
654 - 656					81	136	171	223
657 - 659					80	135	170	222
660 - 663					79	134	169	221
664 - 666					78	133	168	220
667 - 669					77	132	167	219
670 - 673					76	131	166	218
674 - 676					75	130	165	217
677 - 679					74	129	164	216
680 - 683					73	128	163	215

** Check Maximum Allowable Monthly Net Income Standards - section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
584 - 586			8	58	102	157	192	244
587 - 589			7	57	101	156	191	243
590 - 593**			6	56	100	155	190	242
594 - 596				55	99	154	189	241
597 - 599				54	98	153	188	240
600 - 603				53	97	152	187	239
604 - 606				52	96	151	186	238
607 - 609				51	95	150	185	237
610 - 613				50	94	149	184	236
614 - 616				49	93	148	183	235
617 - 619				48	92	147	182	234
620 - 623				47	91	146	181	233
624 - 626				46	90	145	180	232
627 - 629				45	89	144	179	231
630 - 633				44	88	143	178	230
634 - 636				43	87	142	177	229
637 - 639				42	86	141	176	228
640 - 643				41	85	140	175	227
644 - 646				40	84	139	174	226
647 - 649				39	83	138	173	225
650 - 653				38	82	137	172	224
654 - 656				37	81	136	171	223
657 - 659				36	80	135	170	222
660 - 663				35	79	134	169	221
664 - 666				34	78	133	168	220
667 - 669				33	77	132	167	219
670 - 673				32	76	131	166	218
674 - 676				31	75	130	165	217
677 - 679				30	74	129	164	216
680 - 683				29	73	128	163	215

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
581.67 - 584.99		10	8	58	102	157	192	244
585.00 - 588.33		10	7	57	101	156	191	243
588.34 - 591.66		10	6	56	100	155	190	242
591.67 - 594.99			6	55	99	154	189	241
595.00 - 598.33			4	54	98	153	188	240
598.34 - 601.66			4	53	97	152	187	239
601.67 - 604.99			2	52	96	151	186	238
605.00 - 608.33			2	51	95	150	185	237
608.34 - 611.66				50	94	149	184	236
611.67 - 614.99				49	93	148	183	235
615.00 - 618.33				48	92	147	182	234
618.34 - 621.66				47	91	146	181	233
621.67 - 624.99				46	90	145	180	232
625.00 - 628.33				45	89	144	179	231
628.34 - 631.66				44	88	143	178	230
631.67 - 634.99				43	87	142	177	229
635.00 - 638.33				42	86	141	176	228
638.34 - 641.66				41	85	140	175	227
641.67 - 644.99				40	84	139	174	226
645.00 - 648.33				39	83	138	173	225
648.34 - 651.66				38	82	137	172	224
651.67 - 654.99				37	81	136	171	223
655.00 - 658.33				36	80	135	170	222
658.34 - 661.66				35	79	134	169	221
661.67 - 664.99				34	78	133	168	220
665.00 - 668.33				33	77	132	167	219
668.34 - 671.66				32	76	131	166	218
671.67 - 674.99				31	75	130	165	217
675.00 - 678.33				30	74	129	164	216
678.34 - 681.66				29	73	128	163	215

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
684 - 686					72	127	162	214
687 - 689					71	126	161	213
690 - 693					70	125	160	212
694 - 696					69	124	159	211
697 - 699					68	123	158	210
700 - 703					67	122	157	209
704 - 706					66	121	156	208
707 - 709					65	120	155	207
710 - 713					64	119	154	206
714 - 716					63	118	153	205
717 - 719					62	117	152	204
720 - 723					61	116	151	203
724 - 726						115	150	202
727 - 729						114	149	201
730 - 733						113	148	200
734 - 736						112	147	199
737 - 739						111	146	198
740 - 743						110	145	197
744 - 746						109	144	196
747 - 749						108	143	195
750 - 753						107	142	194
754 - 756						106	141	193
757 - 759						105	140	192
760 - 763						104	139	191
764 - 766						103	138	190
767 - 769						102	137	189
770 - 773						101	136	188
774 - 776						100	135	187
777 - 779						99	134	186
780 - 783						98	133	185

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
684 - 686				28	72	127	162	214
687 - 689				27	71	126	161	213
690 - 693				26	70	125	160	212
694 - 696				25	69	124	159	211
697 - 699				24	68	123	158	210
700 - 703				23	67	122	157	209
704 - 706**				22	66	121	156	208
707 - 709					65	120	155	207
710 - 713					64	119	154	206
714 - 716					63	118	153	205
717 - 719					62	117	152	204
720 - 723					61	116	151	203
724 - 726					60	115	150	202
727 - 729					59	114	149	201
730 - 733					58	113	148	200
734 - 736					57	112	147	199
737 - 739					56	111	146	198
740 - 743					55	110	145	197
744 - 746					54	109	144	196
747 - 749					53	108	143	195
750 - 753					52	107	142	194
754 - 756					51	106	141	193
757 - 759					50	105	140	192
760 - 763					49	104	139	191
764 - 766					48	103	138	190
767 - 769					47	102	137	189
770 - 773					46	101	136	188
774 - 776					45	100	135	187
777 - 779					44	99	134	186
780 - 783					43	98	133	185

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
681.67 - 684.99				28	72	127	162	214
685.00 - 688.33				27	71	126	161	213
688.34 - 691.66				26	70	125	160	212
691.67 - 694.99				25	69	124	159	211
695.00 - 698.33				24	68	123	158	210
698.34 - 701.66				23	67	122	157	209
701.67 - 704.99				22	66	121	156	208
705.00 - 708.33				21	65	120	155	207
708.34 - 711.66				20	64	119	154	206
711.67 - 714.99				19	63	118	153	205
715.00 - 718.33				18	62	117	152	204
718.34 - 721.66				17	61	116	151	203
721.67 - 724.99				16	60	115	150	202
725.00 - 728.33				15	59	114	149	201
728.34 - 731.66				14	58	113	148	200
731.67 - 734.99				13	57	112	147	199
735.00 - 738.33				12	56	111	146	198
738.34 - 741.66				11	55	110	145	197
741.67 - 744.99				10	54	109	144	196
745.00 - 748.33				9	53	108	143	195
748.34 - 751.66				8	52	107	142	194
751.67 - 754.99				7	51	106	141	193
755.00 - 758.33				6	50	105	140	192
758.34 - 761.66				6	49	104	139	191
761.67 - 764.99				4	48	103	138	190
765.00 - 768.33				4	47	102	137	189
768.34 - 771.66				2	46	101	136	188
771.67 - 774.99				2	45	100	135	187
775.00 - 778.33					44	99	134	186
778.34 - 781.66					43	98	133	185

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Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
784 - 786						97	132	184
787 - 789						96	131	183
790 - 793						95	130	182
794 - 796						94	129	181
797 - 799						93	128	180
800 - 803						92	127	179
804 - 806						91	126	178
807 - 809						90	125	177
810 - 813						89	124	176
814 - 816						88	123	175
817 - 819						87	122	174
820 - 823						86	121	173
824 - 826**						85	120	172
827 - 829							119	171
830 - 833							118	170
834 - 836							117	169
837 - 839							116	168
840 - 843							115	167
844 - 846							114	166
847 - 849							113	165
850 - 853							112	164
854 - 856							111	163
857 - 859							110	162
860 - 863							109	161
864 - 866							108	160
867 - 869							107	159
870 - 873							106	158
874 - 876							105	157
877 - 879							104	156
880 - 883							103	155
884 - 886							102	154

** Check Maximum Monthly Net Income Standards - section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

Monthly Net Income	COUPON ALLOTMENTS BY HOUSEHOLD SIZE							
	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
784 - 786					42	97	132	184
787 - 789					41	96	131	183
790 - 793					40	95	130	182
794 - 796					39	94	129	181
797 - 799					38	93	128	180
800 - 803					37	92	127	179
804 - 806					36	91	126	178
807 - 809					35	90	125	177
810 - 813					34	89	124	176
814 - 816					33	88	123	175
817 - 819					32	87	122	174
820 - 823**					31	86	121	173
824 - 826						85	120	172
827 - 829						84	119	171
830 - 833						83	118	170
834 - 836						82	117	169
837 - 839						81	116	168
840 - 843						80	115	167
844 - 846						79	114	166
847 - 849						78	113	165
850 - 853						77	112	164
854 - 856						76	111	163
857 - 859						75	110	162
860 - 863						74	109	161
864 - 866						73	108	160
867 - 869						72	107	159
870 - 873						71	106	158
874 - 876						70	105	157
877 - 879						69	104	156
880 - 883						68	103	155
884 - 886						67	102	154

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
781.67 - 784.99					42	97	132	184
785.00 - 788.33					41	96	131	183
788.34 - 791.66					40	95	130	182
791.67 - 794.99					39	94	129	181
795.00 - 798.33					38	93	128	180
798.34 - 801.66					37	92	127	179
801.67 - 804.99					36	91	126	178
805.00 - 808.33					35	90	125	177
808.34 - 811.66					34	89	124	176
811.67 - 814.99					33	88	123	175
815.00 - 818.33					32	87	122	174
818.34 - 821.66					31	86	121	173
821.67 - 824.99					30	85	120	172
825.00 - 828.33					29	84	119	171
828.34 - 831.66					28	83	118	170
831.67 - 834.99					27	82	117	169
835.00 - 838.33					26	81	116	168
838.34 - 841.66					25	80	115	167
841.67 - 844.99					24	79	114	166
845.00 - 848.33					23	78	113	165
848.34 - 851.66					22	77	112	164
851.67 - 854.99					21	76	111	163
855.00 - 858.33					20	75	110	162
858.34 - 861.66					19	74	109	161
861.67 - 864.99					18	73	108	160
865.00 - 868.33					17	72	107	159
868.34 - 871.66					16	71	106	158
871.67 - 874.99					15	70	105	157
875.00 - 878.33					14	69	104	156
878.34 - 881.66					13	68	103	155

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
887 - 889							101	153
890 - 893							100	152
894 - 896							99	151
897 - 899							98	150
900 - 903							97	149
904 - 906							96	148
907 - 909							95	147
910 - 913							94	146
914 - 916							93	145
917 - 919							92	144
920 - 923							91	143
924 - 926							90	142
927 - 929								141
930 - 933								140
934 - 936								139
937 - 939								138
940 - 943								137
944 - 946								136
947 - 949								135
950 - 953								134
954 - 956								133
957 - 959								132
960 - 963								131
964 - 966								130
967 - 969								129
970 - 973								128
974 - 976								127
977 - 979								126
980 - 983								125

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FOOD STAMP PROGRAM ISSUANCE TABLES

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
887 - 889						66	101	153
890 - 893						65	100	152
894 - 896						64	99	151
897 - 899						63	98	150
900 - 903						62	97	149
904 - 906						61	96	148
907 - 909						60	95	147
910 - 913						59	94	146
914 - 916						58	93	145
917 - 919						57	92	144
920 - 923						56	91	143
924 - 926						55	90	142
927 - 929						54	89	141
930 - 933						53	88	140
934 - 936**						52	87	139
937 - 939							86	138
940 - 943							85	137
944 - 946							84	136
947 - 949							83	135
950 - 953							82	134
954 - 956							81	133
957 - 959							80	132
960 - 963							79	131
964 - 966							78	130
967 - 969							77	129
970 - 973							76	128
974 - 976							75	127
977 - 979							74	126
980 - 983							73	125

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
881.67 - 884.99					12	67	102	154
885.00 - 888.33					11	66	101	153
888.34 - 891.66					10	65	100	152
891.67 - 894.99					9	64	99	151
895.00 - 898.33					8	63	98	150
898.34 - 901.66					7	62	97	149
901.67 - 904.99**					6	61	96	148
905.00 - 908.33					5	60	95	147
908.34 - 911.66					4	59	94	146
911.67 - 914.99					4	58	93	145
915.00 - 918.33					3	57	92	144
918.34 - 921.66					2	56	91	143
921.67 - 924.99					2	55	90	142
925.00 - 928.33						54	89	141
928.34 - 931.66						53	88	140
931.67 - 934.99						52	87	139
935.00 - 938.33						51	86	138
938.34 - 941.66						50	85	137
941.67 - 944.99						49	84	136
945.00 - 948.33						48	83	135
948.34 - 951.66						47	82	134
951.67 - 954.99						46	81	133
955.00 - 958.33						45	80	132
958.34 - 961.66						44	79	131
961.67 - 964.99						43	78	130
965.00 - 968.33						42	77	129
968.34 - 971.66						41	76	128
971.67 - 974.99						40	75	127
975.00 - 978.33						39	74	126
978.34 - 981.66						38	73	125

** Check Maximum Net Income Standards (Section 364.970) - Net Income Households Only

Gross Income Households Only

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FOOD STAMP PROGRAM ISSUANCE TABLESCOUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
984 - 986								124
987 - 989								123
990 - 993								122
994 - 996								121
997 - 999								120
1000 - 1003								119
1004 - 1006								118
1007 - 1009								117
1010 - 1013								116
1014 - 1016								115
1017 - 1019								114
1020 - 1023								113
1024 - 1026								112
1027 - 1028								111

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
984 - 986							72	124
987 - 989							71	123
990 - 993							70	122
994 - 996							69	121
997 - 999							68	120
1000 - 1003							67	119
1004 - 1006							66	118
1007 - 1009							65	117
1010 - 1013							64	116
1014 - 1016							63	115
1017 - 1019							62	114
1020 - 1023							61	113
1024 - 1026							60	112
1027 - 1029							59	111
1030 - 1033							58	110
1034 - 1036							57	109
1037 - 1039							56	108
1040 - 1043							55	107
1044 - 1046							54	106
1047 - 1049							53	105
1050 - 1053**							52	104
1054 - 1056								103
1057 - 1059								102
1060 - 1063								101
1064 - 1066								100
1067 - 1069								99
1070 - 1073								98
1074 - 1076								97
1077 - 1079								96
1080 - 1083								95

**

Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
981.67 -	984.99					37	72	124
985.00 -	988.33					36	71	123
988.34 -	991.66					35	70	122
991.67 -	994.99					34	69	121
995.00 -	998.33					33	68	120
998.34 -	1001.66					32	67	119
1001.67 -	1004.99					31	66	118
1005.00 -	1008.33					30	65	117
1008.34 -	1011.66					29	64	116
1011.67 -	1014.99					28	63	115
1015.00 -	1018.33					27	62	114
1018.34 -	1021.66					26	61	113
1021.67 -	1024.99					25	60	112
1025.00 -	1028.33					24	59	111
1028.34 -	1031.66					23	58	110
1031.67 -	1034.99**					22	57	109
1035.00 -	1038.33					21	56	108
1038.34 -	1041.66					20	55	107
1041.67 -	1044.99					19	54	106
1045.00 -	1048.33					18	53	105
1048.34 -	1051.66					17	52	104
1051.67 -	1054.99					16	51	103
1055.00 -	1058.33					15	50	102
1058.34 -	1061.66					14	49	101
1061.67 -	1064.99					13	48	100
1065.00 -	1068.33					12	47	99
1068.34 -	1071.66					11	46	98
1071.67 -	1074.99					10	45	97
1075.00 -	1078.33					9	44	96
1078.34 -	1081.66					8	43	95

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Check Maximum Net Income Standards (Section 364.970) - Net Income Households Only

Gross Income Households Only

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE								
Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
1084 - 1086								94
1087 - 1089								93
1090 - 1093								92
1094 - 1096								91
1097 - 1099								90
1100 - 1103								89
1104 - 1106								88
1107 - 1109								87
1110 - 1113								86
1114 - 1116								85
1117 - 1119								84
1120 - 1123								83
1124 - 1126								82
1127 - 1129								81
1130 - 1133								80
1134 - 1136								79
1137 - 1139								78
1140 - 1143								77
1144 - 1146								76
1147 - 1149								75
1150 - 1153								74
1154 - 1156								73
1157 - 1159								72
1160 - 1163								71
1164 - 1166**								70

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Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
1081.67 - 1084.99						7	42	94
1085.00 - 1088.33						6	41	93
1088.34 - 1091.66						6	40	92
1091.67 - 1094.99						4	39	91
1095.00 - 1098.33						4	38	90
1098.34 - 1101.66						2	37	89
1101.67 - 1104.99						2	36	88
1105.00 - 1108.33						2	35	87
1108.34 - 1111.66							34	86
1111.67 - 1114.99							33	85
1115.00 - 1118.33							32	84
1118.34 - 1121.66							31	83
1121.67 - 1124.99							30	82
1125.00 - 1128.33							29	81
1128.34 - 1131.66							28	80
1131.67 - 1134.99							27	79
1135.00 - 1138.33							26	78
1138.34 - 1141.66							25	77
1141.67 - 1144.99							24	76
1145.00 - 1148.33							23	75
1148.34 - 1151.66							22	74
1151.67 - 1154.99							21	73
1155.00 - 1158.33							20	72
1158.34 - 1161.66**							19	71
1161.67 - 1164.99							18	70

** Check Maximum Net Income Standards (Section 364.970) - Net Income Households Only
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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
1165.00 - 1168.33							17	69
1168.34 - 1171.66							16	68
1171.67 - 1174.99							15	67
1175.00 - 1178.33							14	66
1178.34 - 1181.66							13	65
1181.67 - 1184.99							12	64
1185.00 - 1188.33							11	63
1188.34 - 1191.66							10	62
1191.67 - 1194.99							9	61
1195.00 - 1198.33							8	60
1198.34 - 1201.66							7	59
1201.66 - 1204.99							6	58
1205.00 - 1208.33							5	57
1208.34 - 1211.66							4	56
1211.67 - 1214.99							4	55
1215.00 - 1218.33							2	54
1218.34 - 1221.66							2	53
1221.67 - 1224.99							2	52
1225.00 - 1228.33								51
1228.34 - 1231.66								50
1231.67 - 1234.99								49
1235.00 - 1238.33								48
1238.34 - 1241.66								47
1241.67 - 1244.99								46
1245.00 - 1248.33								45
1248.34 - 1251.66								44
1251.67 - 1254.99								43
1255.00 - 1258.33								42
1258.34 - 1261.66								41
1261.67 - 1264.99								40

Gross Income Households Only

Trans. by S.L. 588

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
1265.00 - 1268.33								39
1268.34 - 1271.66								38
1271.67 - 1274.99								37
1275.00 - 1278.33								36
1278.34 - 1281.66								35
1281.67 - 1284.99								34
1285.00 - 1288.33								33
1288.34 - 1291.66**								32
1291.67 - 1294.99								31
1295.00 - 1298.33								30
1298.34 - 1301.66								29
1301.67 - 1304.99								28
1305.00 - 1308.33								27
1308.34 - 1311.66								26
1311.67 - 1314.99								25
1315.00 - 1318.33								24
1318.34 - 1321.66								23
1321.67 - 1324.99								22
1325.00 - 1328.33								21
1328.34 - 1331.66								20
1331.67 - 1334.99								19
1335.00 - 1338.33								18
1338.34 - 1341.66								17
1341.67 - 1344.99								16
1345.00 - 1348.33								15
1348.34 - 1351.66								14
1351.67 - 1354.99								13
1355.00 - 1358.33								12
1358.34 - 1361.66								11
1361.67 - 1364.99								10

**Check Maximum Net Income Standards (Section 364.970) - Net Income Households only
 Gross Income Households Only

Trans. by S.L. 559

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
1365.00 - 1368.33								9
1368.34 - 1371.66								8
1371.67 - 1374.99								7
1375.00 - 1378.33								6
1378.34 - 1381.66								6
1381.67 - 1384.99								4
1385.00 - 1388.33								4
1388.34 - 1391.66								2
1391.67 - 1394.99								2

Gross Income Households Only

STANDARD UTILITY ALLOWANCES

FIRST MONTH OF CERT. PD.	NUMBER OF MONTHS IN CERTIFICATION PERIOD - STANDARD UTILITY ALLOWANCE									
JANUARY	1 month -	\$240;	4 months -	\$161;	7 months -	\$116;	10 months -	\$89;		
	2 months -	\$204;	5 months -	\$139;	8 months -	\$95;	11 months -	\$84;		
	3 months -	\$167;	6 months -	\$122;	9 months -	\$85;	12 months -	\$75;		
FEBRUARY	1 month -	\$167;	4 months -	\$114;	7 months -	\$75;	10 months -	\$73;		
	2 months -	\$161;	5 months -	\$98;	8 months -	\$69;	11 months -	\$62;		
	3 months -	\$134;	6 months -	\$83;	9 months -	\$72;	12 months -	\$105;		
MARCH	1 month -	\$155;	4 months -	\$78;	7 months -	\$55;	10 months -	\$45;		
	2 months -	\$112;	5 months -	\$66;	8 months -	\$60;	11 months -	\$99;		
	3 months -	\$96;	6 months -	\$59;	9 months -	\$59;	12 months -	\$125;		
APRIL	1 month -	\$81;	4 months -	\$44;	7 months -	\$40;	10 months -	\$93;		
	2 months -	\$66;	5 months -	\$40;	8 months -	\$50;	11 months -	\$100;		
	3 months -	\$52;	6 months -	\$39;	9 months -	\$77;	12 months -	\$105;		
MAY	1 month -	\$51;	4 months -	\$30;	7 months -	\$56;	10 months -	\$127;		
	2 months -	\$38;	5 months -	\$30;	8 months -	\$77;	11 months -	\$107;		
	3 months -	\$32;	6 months -	\$41;	9 months -	\$95;	12 months -	\$105;		
JUNE	1 month -	\$24;	4 months -	\$25;	7 months -	\$80;	10 months -	\$122;		
	2 months -	\$23;	5 months -	\$38;	8 months -	\$100;	11 months -	\$106;		
	3 months -	\$23;	6 months -	\$56;	9 months -	\$108;	12 months -	\$105;		
JULY	1 month -	\$21;	4 months -	\$42;	7 months -	\$111;	10 months -	\$118;		
	2 months -	\$22;	5 months -	\$63;	8 months -	\$100;	11 months -	\$112;		
	3 months -	\$25;	6 months -	\$90;	9 months -	\$122;	12 months -	\$105;		
AUGUST	1 month -	\$23;	4 months -	\$73;	7 months -	\$132;	10 months -	\$121;		
	2 months -	\$27;	5 months -	\$103;	8 months -	\$135;	11 months -	\$112;		
	3 months -	\$49;	6 months -	\$126;	9 months -	\$129;	12 months -	\$105;		
SEPTEMBER	1 month -	\$31;	4 months -	\$123;	7 months -	\$151;	10 months -	\$121;		
	2 months -	\$62;	5 months -	\$147;	8 months -	\$142;	11 months -	\$112;		
	3 months -	\$90;	6 months -	\$150;	9 months -	\$132;	12 months -	\$105;		
OCTOBER	1 month -	\$93;	4 months -	\$176;	7 months -	\$158;	10 months -	\$120;		
	2 months -	\$120;	5 months -	\$174;	8 months -	\$135;	11 months -	\$111;		
	3 months -	\$154;	6 months -	\$171;	9 months -	\$131;	12 months -	\$105;		
NOVEMBER	1 month -	\$146;	4 months -	\$194;	7 months -	\$162;	10 months -	\$113;		
	2 months -	\$155;	5 months -	\$186;	8 months -	\$136;	11 months -	\$106;		
	3 months -	\$203;	6 months -	\$169;	9 months -	\$123;	12 months -	\$105;		
DECEMBER	1 month -	\$223;	4 months -	\$196;	7 months -	\$134;	10 months -	\$102;		
	2 months -	\$232;	5 months -	\$173;	8 months -	\$120;	11 months -	\$101;		
	3 months -	\$210;	6 months -	\$153;	9 months -	\$109;	12 months -	\$105;		

PROCEDURES FOR TABLE USE:

1. Find the first month of the certification period in the first vertical column of months.
2. Read across until you find the figure for the number of months in the certification period.
3. The dollar figure next to the number of months will be the standard utility allowance.
4. The standard utility allowance for the certification period represents the monthly amount to be deducted for heating, cooling, cooking fuel, and electric expenses.
5. Add this allowance to other shelter expenses to derive total shelter expenses.

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MAXIMUM ALLOWABLEMONTHLY NET INCOME STANDARDSHousehold SizeMaximum Allowable
Monthly Amount

1	\$360
2	475
3	590
4	705
5	820
6	935
7	1050
8	1165
For each additional member	add 115

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
0 - 3	*70	*128	*183	*233	*277	*332	*367	*419
4 - 6	69	127	182	232	276	331	366	418
7 - 9	68	126	181	231	275	330	365	417
10 - 13	67	125	180	230	274	329	364	416
14 - 16	66	124	179	229	273	328	363	415
17 - 19	65	123	178	228	272	327	362	414
20 - 23	64	122	177	227	271	326	361	413
24 - 26	63	121	176	226	270	325	360	412
27 - 29	62	120	175	225	269	324	359	411
30 - 33	61	119	174	224	268	323	358	410
34 - 36	60	118	173	223	267	322	357	409
37 - 39	59	117	172	222	266	321	356	408
40 - 43	58	116	171	221	265	320	355	407
44 - 46	57	115	170	220	264	319	354	406
47 - 49	56	114	169	219	263	318	353	405
50 - 53	55	113	168	218	262	317	352	404
54 - 56	54	112	167	217	261	316	351	403
57 - 59	53	111	166	216	260	315	350	402
60 - 63	52	110	165	215	259	314	349	401
64 - 66	51	109	164	214	258	313	348	400
67 - 69	50	108	163	213	257	312	347	399
70 - 73	49	107	162	212	256	311	346	398
74 - 76	48	106	161	211	255	310	345	397
77 - 79	47	105	160	210	254	309	344	396
80 - 83	46	104	159	209	253	308	343	395

*MAXIMUM COUPON ALLOTMENT FOR THE HOUSEHOLD SIZE

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
84 - 86	45	103	158	208	252	307	342	394
87 - 89	44	102	157	207	251	306	341	393
90 - 93	43	101	156	206	250	305	340	392
94 - 96	42	100	155	205	249	304	339	391
97 - 99	41	99	154	204	248	303	338	390
100 - 103	40	98	153	203	247	302	337	389
104 - 106	39	97	152	202	246	301	336	388
107 - 109	38	96	151	201	245	300	335	387
110 - 113	37	95	150	200	244	299	334	386
114 - 116	36	94	149	199	243	298	333	385
117 - 119	35	93	148	198	242	297	332	384
120 - 123	34	92	147	197	241	296	331	383
124 - 126	33	91	146	196	240	295	330	382
127 - 129	32	90	145	195	239	294	329	381
130 - 133	31	89	144	194	238	293	328	380
134 - 136	30	88	143	193	237	292	327	379
137 - 139	29	87	142	192	236	291	326	378
140 - 143	28	86	141	191	235	290	325	377
144 - 146	27	85	140	190	234	289	324	376
147 - 149	26	84	139	189	233	288	323	375
150 - 153	25	83	138	188	232	287	322	374
154 - 156	24	82	137	187	231	286	321	373
157 - 159	23	81	136	186	230	285	320	372
160 - 163	22	80	135	185	229	284	319	371
164 - 166	21	79	134	184	228	283	318	370
167 - 169	20	78	133	183	227	282	317	369
170 - 173	19	77	132	182	226	281	316	368
174 - 176	18	76	131	181	225	280	315	367
177 - 179	17	75	130	180	224	279	314	366
180 - 183	16	74	129	179	223	278	313	365

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
184 - 186	15	73	128	178	222	277	312	364
187 - 189	14	72	127	177	221	276	311	363
190 - 193	13	71	126	176	220	275	310	362
194 - 196	12	70	125	175	219	274	309	361
197 - 199	11	69	124	174	218	273	308	360
200 - 203	10	68	123	173	217	272	307	359
204 - 206	10	67	122	172	216	271	306	358
207 - 209	10	66	121	171	215	270	305	357
210 - 213	10	65	120	170	214	269	304	356
214 - 216	10	64	119	169	213	268	303	355
217 - 219	10	63	118	168	212	267	302	354
220 - 223	10	62	117	167	211	266	301	353
224 - 226	10	61	116	166	210	265	300	352
227 - 229	10	60	115	165	209	264	299	351
230 - 233	10	59	114	164	208	263	298	350
234 - 236	10	58	113	163	207	262	297	349
237 - 239	10	57	112	162	206	261	296	348
240 - 243	10	56	111	161	205	260	295	347
244 - 246	10	55	110	160	204	259	294	346
247 - 249	10	54	109	159	203	258	293	345
250 - 253	10	53	108	158	202	257	292	344
254 - 256	10	52	107	157	201	256	291	343
257 - 259	10	51	106	156	200	255	290	342
260 - 263	10	50	105	155	199	254	289	341
264 - 266	10	49	104	154	198	253	288	340
267 - 269	10	48	103	153	197	252	287	339
270 - 273	10	47	102	152	196	251	286	338
274 - 276	10	46	101	151	195	250	285	337
277 - 279	10	45	100	150	194	249	284	336
280 - 283	10	44	99	149	193	248	283	335

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
284 - 286	10	43	98	148	192	247	282	334
287 - 289	10	42	97	147	191	246	281	333
290 - 293	10	41	96	146	190	245	280	332
294 - 296	10	40	95	145	189	244	279	331
297 - 299	10	39	94	144	188	243	278	330
300 - 303	10	38	93	143	187	242	277	329
304 - 306	10	37	92	142	186	241	276	328
307 - 309	10	36	91	141	185	240	275	327
310 - 313	10	35	90	140	184	239	274	326
314 - 316	10	34	89	139	183	238	273	325
317 - 319	10	33	88	138	182	237	272	324
320 - 323	10	32	87	137	181	236	271	323
324 - 326	10	31	86	136	180	235	270	322
327 - 329	10	30	85	135	179	234	269	321
330 - 333	10	29	84	134	178	233	268	320
334 - 336	10	28	83	133	177	232	267	319
337 - 339	10	27	82	132	176	231	266	318
340 - 343	10	26	81	131	175	230	265	317
344 - 346	10	25	80	130	174	229	264	316
347 - 349	10	24	79	129	173	228	263	315
350 - 353	10	23	78	128	172	227	262	314
354 - 356	10	22	77	127	171	226	261	313
357 - 359	10	21	76	126	170	225	260	312
360 - 363**	10	20	75	125	169	224	259	311
364 - 366		19	74	124	168	223	258	310
367 - 369		18	73	123	167	222	257	309
370 - 373		17	72	122	166	221	256	308
374 - 376		16	71	121	165	220	255	307
377 - 379		15	70	120	164	219	254	306
380 - 383		14	69	119	163	218	253	305

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
384 - 386	13	68	118	162	217	252	304	
387 - 389	12	67	117	161	216	251	303	
390 - 393	11	66	116	160	215	250	302	
394 - 396	10	65	115	159	214	249	301	
397 - 399	10	64	114	158	213	248	300	
400 - 403	10	63	113	157	212	247	299	
404 - 406	10	62	112	156	211	246	298	
407 - 409	10	61	111	155	210	245	297	
410 - 413	10	60	110	154	209	244	296	
414 - 416	10	59	109	153	208	243	295	
417 - 419	10	58	108	152	207	242	294	
420 - 423	10	57	107	151	206	241	293	
424 - 426	10	56	106	150	205	240	292	
427 - 429	10	55	105	149	204	239	291	
430 - 433	10	54	104	148	203	238	290	
434 - 436	10	53	103	147	202	237	289	
437 - 439	10	52	102	146	201	236	288	
440 - 443	10	51	101	145	200	235	287	
444 - 446	10	50	100	144	199	234	286	
447 - 449	10	49	99	143	198	233	285	
450 - 453	10	48	98	142	197	232	284	
454 - 456	10	47	97	141	196	231	283	
457 - 459	10	46	96	140	195	230	282	
460 - 463	10	45	95	139	194	229	281	
464 - 466	10	44	94	138	193	228	280	
467 - 469	10	43	93	137	192	227	279	
470 - 473	10	42	92	136	191	226	278	
474 - 476**	10	41	91	135	190	225	277	
477 - 479		40	90	134	189	224	276	
480 - 483		39	89	133	188	223	275	

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
484 - 486	38			88	132	187	222	274
487 - 489	37			87	131	186	221	273
490 - 493	36			86	130	185	220	272
494 - 496	35			85	129	184	219	271
497 - 499	34			84	128	183	218	270
500 - 503	33			83	127	182	217	269
504 - 506	32			82	126	181	216	268
507 - 509	31			81	125	180	215	267
510 - 513	30			80	124	179	214	266
514 - 516	29			79	123	178	213	265
517 - 519	28			78	122	177	212	264
520 - 523	27			77	121	176	211	263
524 - 526	26			76	120	175	210	262
527 - 529	25			75	119	174	209	261
530 - 533	24			74	118	173	208	260
534 - 536	23			73	117	172	207	259
537 - 539	22			72	116	171	206	258
540 - 543	21			71	115	170	205	257
544 - 546	20			70	114	169	204	256
547 - 549	19			69	113	168	203	255
550 - 553	18			68	112	167	202	254
554 - 556	17			67	111	166	201	253
557 - 559	16			66	110	165	200	252
560 - 563	15			65	109	164	199	251
564 - 566	14			64	108	163	198	250
567 - 569	13			63	107	162	197	249
570 - 573	12			62	106	161	196	248
574 - 576	11			61	105	160	195	247
577 - 579	10			60	104	159	194	246
580 - 583	9			59	103	158	193	245

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
584 - 586			8	58	102	157	192	244
587 - 589			7	57	101	156	191	243
590 - 593**			6	56	100	155	190	242
594 - 596				55	99	154	189	241
597 - 599				54	98	153	188	240
600 - 603				53	97	152	187	239
604 - 606				52	96	151	186	238
607 - 609				51	95	150	185	237
610 - 613				50	94	149	184	236
614 - 616				49	93	148	183	235
617 - 619				48	92	147	182	234
620 - 623				47	91	146	181	233
624 - 626				46	90	145	180	232
627 - 629				45	89	144	179	231
630 - 633				44	88	143	178	230
634 - 636				43	87	142	177	229
637 - 639				42	86	141	176	228
640 - 643				41	85	140	175	227
644 - 646				40	84	139	174	226
647 - 649				39	83	138	173	225
650 - 653				38	82	137	172	224
654 - 656				37	81	136	171	223
657 - 659				36	80	135	170	222
660 - 663				35	79	134	169	221
664 - 666				34	78	133	168	220
667 - 669				33	77	132	167	219
670 - 673				32	76	131	166	218
674 - 676				31	75	130	165	217
677 - 679				30	74	129	164	216
680 - 683				29	73	128	163	215

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
584 - 686				28	72	127	162	214
687 - 689				27	71	126	161	213
690 - 693				26	70	125	160	212
694 - 696				25	69	124	159	211
697 - 699				24	68	123	158	210
700 - 703				23	67	122	157	209
704 - 706**				22	66	121	156	208
707 - 709					65	120	155	207
710 - 713					64	119	154	206
714 - 716					63	118	153	205
717 - 719					62	117	152	204
720 - 723					61	116	151	203
724 - 726					60	115	150	202
727 - 729					59	114	149	201
730 - 733					58	113	148	200
734 - 736					57	112	147	199
737 - 739					56	111	146	198
740 - 743					55	110	145	197
744 - 746					54	109	144	196
747 - 749					53	108	143	195
750 - 753					52	107	142	194
754 - 756					51	106	141	193
757 - 759					50	105	140	192
760 - 763					49	104	139	191
764 - 766					48	103	138	190
767 - 769					47	102	137	189
770 - 773					46	101	136	188
774 - 776					45	100	135	187
777 - 779					44	99	134	186
780 - 783					43	98	133	185

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
784 - 786					42	97	132	184
787 - 789					41	96	131	183
790 - 793					40	95	130	182
794 - 796					39	94	129	181
797 - 799					38	93	128	180
800 - 803					37	92	127	179
804 - 806					36	91	126	178
807 - 809					35	90	125	177
810 - 813					34	89	124	176
814 - 816					33	88	123	175
817 - 819					32	87	122	174
820 - 823**					31	86	121	173
824 - 826						85	120	172
827 - 829						84	119	171
830 - 833						83	118	170
834 - 836						82	117	169
837 - 839						81	116	168
840 - 843						80	115	167
844 - 846						79	114	166
847 - 849						78	113	165
850 - 853						77	112	164
854 - 856						76	111	163
857 - 859						75	110	162
860 - 863						74	109	161
864 - 866						73	108	160
867 - 869						72	107	159
870 - 873						71	106	158
874 - 876						70	105	157
877 - 879						69	104	156
880 - 883						68	103	155
884 - 886						67	102	154

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FOOD STAMP PROGRAM ISSUANCE TABLES

COUPON ALLOTMENTS BY HOUSEHOLD SIZE

Monthly Net Income	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons	Eight Persons
887 - 889						66	101	153
890 - 893						65	100	152
894 - 896						64	99	151
897 - 899						63	98	150
900 - 903						62	97	149
904 - 906						61	96	148
907 - 909						60	95	147
910 - 913						59	94	146
914 - 916						58	93	145
917 - 919						57	92	144
920 - 923						56	91	143
924 - 926						55	90	142
927 - 929						54	89	141
930 - 933						53	88	140
934 - 936**						52	87	139
937 - 939							86	138
940 - 943							85	137
944 - 946							84	136
947 - 949							83	135
950 - 953							82	134
954 - 956							81	133
957 - 959							80	132
960 - 963							79	131
964 - 966							78	130
967 - 969							77	129
970 - 973							76	128
974 - 976							75	127
977 - 979							74	126
980 - 983							73	125

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

Monthly Net Income	COUPON ALLOTMENTS BY HOUSEHOLD SIZE						
	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons
984 - 986							72
987 - 989							71
990 - 993							70
994 - 996							69
997 - 999							68
1000 - 1003							67
1004 - 1006							66
1007 - 1009							65
1010 - 1013							64
1014 - 1016							63
1017 - 1019							62
1020 - 1023							61
1024 - 1026							60
1027 - 1029							59
1030 - 1033							58
1034 - 1036							57
1037 - 1039							56
1040 - 1043							55
1044 - 1046							54
1047 - 1049							53
1050 - 1053**							52
1054 - 1056							
1057 - 1059							
1060 - 1063							
1064 - 1066							
1067 - 1069							
1070 - 1073							
1074 - 1076							
1077 - 1079							
1080 - 1083							

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP PROGRAM ISSUANCE TABLES

Monthly Net Income	COUPON ALLOTMENTS BY HOUSEHOLD SIZE						
	One Person	Two Persons	Three Persons	Four Persons	Five Persons	Six Persons	Seven Persons
1084 - 1086							94
1087 - 1089							93
1090 - 1093							92
1094 - 1096							91
1097 - 1099							90
1100 - 1103							89
1104 - 1106							88
1107 - 1109							87
1110 - 1113							86
1114 - 1116							85
1117 - 1119							84
1120 - 1123							83
1124 - 1126							82
1127 - 1129							81
1130 - 1133							80
1134 - 1136							79
1137 - 1139							78
1140 - 1143							77
1144 - 1146							76
1147 - 1149							75
1150 - 1153							74
1154 - 1156							73
1157 - 1159							72
1160 - 1163							71
1164 - 1166**							70

** Check Maximum Allowable Monthly Net Income Standards - Section 364.970

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FOOD STAMP ALLOTMENT PRORATION TABLE

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	0	0	0	0	0	0	0
4	4	4	4	4	4	4	4	4	4	4	4	4	2	2	2	2	2	2	2	2	2	2	2	2	2	2	0	0	0	0
6	6	6	6	6	6	6	6	6	4	4	4	4	4	4	4	4	4	4	2	2	2	2	2	2	2	2	2	2	0	0
7	7	7	7	6	6	6	6	6	6	6	6	4	4	4	4	4	4	4	4	4	4	2	2	2	2	2	2	2	0	0
8	8	8	7	7	7	7	6	6	6	6	6	6	6	6	4	4	4	4	4	4	4	2	2	2	2	2	2	2	0	0
9	9	9	8	8	8	8	7	7	7	7	6	6	6	6	6	6	4	4	4	4	4	4	2	2	2	2	2	2	2	0
10	10	10	9	9	9	8	8	7	7	7	7	6	6	6	6	6	6	4	4	4	4	4	2	2	2	2	2	2	2	0
11	11	11	10	10	10	9	8	8	8	8	7	7	7	6	6	6	6	6	4	4	4	4	4	4	2	2	2	2	2	0
12	12	12	11	11	10	10	9	9	9	8	8	8	7	7	7	6	6	6	6	4	4	4	4	4	2	2	2	2	2	0
13	13	13	12	12	11	11	10	10	10	9	9	8	8	7	7	7	6	6	6	6	4	4	4	4	4	2	2	2	2	0
14	14	14	13	13	12	12	11	11	10	10	9	9	8	8	7	7	7	6	6	6	6	4	4	4	4	2	2	2	2	0
15	15	14	14	14	13	12	12	11	11	10	10	9	9	8	8	7	7	6	6	6	6	4	4	4	4	2	2	2	2	0
16	16	15	15	14	14	13	13	12	12	11	11	10	10	9	9	8	7	7	6	6	6	6	4	4	4	4	2	2	2	2
17	17	16	16	15	15	14	14	13	13	12	11	11	10	10	9	9	8	7	7	6	6	6	6	4	4	4	4	2	2	2
18	18	17	17	16	16	15	15	14	14	13	13	12	11	11	10	10	9	8	7	7	6	6	6	4	4	4	4	2	2	2
19	19	18	18	17	16	16	15	15	14	13	13	12	11	11	10	10	9	8	7	7	6	6	6	4	4	4	4	2	2	2
20	20	19	19	18	17	17	16	15	15	14	13	13	12	11	11	10	9	8	7	7	6	6	6	4	4	4	4	2	2	2
21	21	20	20	19	18	17	17	16	15	15	14	13	13	12	11	11	10	9	8	7	7	6	6	6	4	4	4	2	2	2
22	22	21	21	20	19	18	18	17	16	15	15	14	13	12	12	11	10	9	8	7	7	6	6	6	4	4	4	2	2	2
23	23	22	21	21	20	19	18	18	17	16	15	15	14	13	12	12	11	10	9	8	7	7	6	6	6	4	4	2	2	2
24	24	23	22	22	21	20	19	18	18	17	16	15	14	14	13	12	11	10	9	8	7	7	6	6	6	4	4	2	2	2
25	25	24	23	23	22	21	20	19	18	18	17	16	15	14	13	12	11	10	9	8	7	7	6	6	6	4	4	2	2	2
26	26	25	24	23	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	7	6	6	6	4	4	2	2	2
27	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	7	6	6	6	4	4	2	2	2
28	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	7	6	6	6	4	4	2	2
29	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	7	6	6	6	4	4	2
30	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	6	6	6	4	4	2
31	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	6	6	4	4	2
32	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	6	4	4	2
33	33	32	31	30	29	27	26	25	24	23	22	21	20	19	18	17	15	14	13	12	11	10	9	8	7	6	4	4	2	2
34	34	33	32	31	29	28	27	26	25	24	23	22	20	19	18	17	16	15	14	12	11	10	9	8	7	6	4	4	2	2
35	35	34	33	32	30	29	28	27	26	25	23	22	21	20	19	18	16	15	14	13	12	11	9	8	7	6	4	4	2	2
36	36	35	34	32	31	30	29	28	26	25	24	23	22	21	19	18	17	16	14	13	12	11	10	8	7	6	4	4	2	2
37	37	36	35	33	32	31	30	29	27	26	25	23	22	21	20	19	17	16	15	14	12	11	10	9	7	6	4	4	2	2
38	38	37	35	34	33	32	30	29	28	27	26	25	24	23	22	20	19	18	16	15	14	13	11	10	9	6	4	4	2	2
39	39	38	36	35	34	32	31	30	29	28	27	26	25	23	22	21	20	18	17	16	14	13	12	10	9	6	4	4	2	2
40	40	39	37	36	35	33	32	31	29	28	27	26	25	24	23	21	20	19	17	16	15	13	12	11	9	8	6	4	4	2

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FOOD STAMP ALLOTMENT PRORATION TABLE

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
41	41	40	38	37	36	34	33	31	30	29	27	26	25	23	22	21	19	18	16	15	14	12	11	10	8	7	6	4	4	2
42	42	41	39	38	36	35	34	32	31	29	28	27	25	24	22	21	20	18	17	15	14	13	11	10	8	7	6	4	4	2
43	43	42	40	39	37	36	34	33	32	30	29	27	26	24	23	22	20	19	17	16	14	13	11	10	9	7	6	4	4	2
44	44	43	41	40	38	37	35	34	32	31	29	28	26	25	23	22	21	19	18	16	15	13	12	10	9	7	6	4	4	2
45	45	43	42	41	39	37	36	34	33	32	30	28	27	25	24	23	21	19	18	16	15	14	12	10	9	7	6	4	4	2
46	46	44	43	41	40	38	37	35	34	32	31	29	28	26	25	23	21	20	18	17	15	14	12	11	9	8	6	6	4	2
47	47	45	44	42	41	39	38	36	34	33	31	30	28	27	25	24	22	20	19	17	16	14	13	11	9	8	6	6	4	2
48	48	46	45	43	42	40	38	37	35	34	32	30	29	27	26	24	22	21	19	18	16	14	13	11	10	8	6	6	4	2
49	49	47	46	44	42	41	39	38	36	34	33	31	29	28	26	25	23	21	20	18	16	15	13	11	10	8	7	6	4	2
50	50	48	47	45	43	42	40	38	37	35	33	32	30	28	27	25	23	22	20	18	17	15	13	12	10	8	7	6	4	2
51	51	49	48	46	44	42	41	39	37	36	34	32	31	29	27	26	24	22	20	19	17	15	14	12	10	8	7	6	4	2
52	52	50	49	47	45	43	42	40	38	36	35	33	31	29	28	26	24	23	21	19	17	16	14	12	10	9	7	6	4	2
53	53	51	49	48	46	44	42	41	39	37	35	34	32	30	26	27	25	23	21	19	18	16	14	12	11	9	7	6	4	2
54	54	52	50	49	47	45	43	41	40	38	36	34	32	31	29	27	25	23	22	20	18	16	14	13	11	9	7	6	4	2
55	55	53	51	50	48	46	44	42	40	39	37	35	33	31	29	28	26	24	22	20	18	17	15	13	11	9	7	6	4	2
56	56	54	52	50	49	47	45	43	41	39	37	35	34	32	30	28	26	24	22	21	19	17	15	13	11	9	7	6	4	2
57	57	55	53	51	49	47	46	44	42	40	38	36	34	32	30	29	27	25	23	21	19	17	15	13	11	9	8	6	4	2
58	58	56	54	52	50	48	46	44	43	41	39	37	35	33	31	29	27	25	23	21	19	17	15	14	12	10	8	6	4	2
59	59	57	55	53	51	49	47	45	43	41	39	37	35	33	31	30	28	26	24	22	20	18	16	14	12	10	8	6	4	2
60	60	58	56	54	52	50	48	46	44	42	40	38	36	34	32	30	28	26	24	22	20	18	16	14	12	10	8	6	4	2
61	61	59	57	55	53	51	49	47	45	43	41	39	37	35	33	31	28	26	24	22	20	18	16	14	12	10	8	6	4	2
62	62	60	58	56	54	52	50	48	45	43	41	39	37	35	33	31	29	27	25	23	21	19	17	14	12	10	8	6	4	2
63	63	61	59	57	55	52	50	48	46	44	42	40	38	36	34	32	29	27	25	23	21	19	17	15	13	10	8	6	4	2
64	64	62	60	58	55	53	51	49	47	45	43	41	38	36	34	32	30	28	26	23	21	19	17	15	13	11	9	6	4	2
65	65	63	61	59	56	54	52	50	48	46	43	41	39	37	35	33	30	28	26	24	22	20	17	15	13	11	9	7	4	2
66	66	64	62	59	57	55	53	51	48	46	44	42	40	37	35	33	31	29	26	24	22	20	18	15	13	11	9	7	4	2
67	67	65	63	60	58	56	54	51	49	47	45	42	40	38	36	34	31	29	27	25	22	20	18	16	13	11	9	7	4	2
68	68	66	63	61	59	57	54	52	50	48	45	43	41	39	36	34	32	29	27	25	23	20	18	16	14	11	9	7	6	2
69	69	67	64	62	60	57	55	53	51	48	46	44	41	39	37	35	32	30	28	25	23	21	18	16	14	11	9	7	6	2
70	70	68	65	63	61	58	56	54	51	49	47	44	42	40	37	35	33	30	28	26	23	21	19	16	14	12	9	7	6	2
71	71	69	66	64	62	59	57	54	52	50	47	45	43	40	38	36	33	31	28	26	24	21	19	17	14	12	9	7	6	2
72	72	70	67	65	62	60	58	55	53	50	48	46	43	41	38	36	34	31	29	26	24	22	19	17	14	12	10	7	6	2
73	73	71	68	66	63	61	58	56	54	51	49	46	44	41	39	37	34	32	29	27	24	22	19	17	15	12	10	7	6	2
74	74	72	69	67	64	62	59	57	54	52	49	47	44	42	39	37	35	32	30	27	25	22	20	17	15	12	10	7	6	2
75	75	72	70	68	65	62	60	57	55	53	50	47	45	42	40	38	35	32	30	27	25	23	20	17	15	12	10	8	6	2
76	76	73	71	68	66	63	61	58	56	53	51	48	46	43	40	38	35	33	30	28	25	23	20	18	15	13	10	8	6	4
77	77	74	72	69	67	64	62	59	56	54	51	49	46	44	41	39	36	33	31	28	26	23	21	18	15	13	10	8	6	4
78	78	75	73	70	68	65	62	60	57	55	52	49	47	44	42	39	36	34	31	29	26	23	21	18	16	13	10	8	6	4
79	79	76	74	71	68	66	63	61	58	55	53	50	47	45	42	40	37	34	32	29	26	24	21	18	16	13	11	8	6	4
80	80	77	75	72	69	67	64	61	59	56	53	51	48	45	43	40	37	35	32	29	27	24	21	19	16	13	11	8	6	4

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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
81	81	78	76	73	70	67	65	62	59	57	54	51	49	46	43	41	38	35	32	30	27	24	22	19	16	13	11	8	6	4
82	82	79	77	74	71	68	66	63	60	57	55	52	49	46	44	41	38	36	33	30	27	25	22	19	16	14	11	8	6	4
83	83	80	77	75	72	69	66	64	61	58	55	53	50	47	44	42	39	36	33	30	28	25	22	19	17	14	11	8	6	4
84	84	81	78	76	73	70	67	64	62	59	56	53	50	48	45	42	39	36	34	31	28	25	22	20	17	14	11	8	6	4
85	85	82	79	77	74	71	68	65	62	60	57	54	51	48	45	43	40	37	34	31	28	26	23	20	17	14	11	9	6	4
86	86	83	80	77	75	72	69	66	63	60	57	54	52	49	46	43	40	37	34	32	29	26	23	20	17	14	11	9	6	4
87	87	84	81	78	75	72	70	67	64	61	58	55	52	49	46	44	41	38	35	32	29	26	23	20	17	14	12	9	6	4
88	88	85	82	79	76	73	70	67	65	62	59	56	53	50	47	44	41	38	35	32	29	26	23	21	18	15	12	9	6	4
89	89	86	83	80	77	74	71	68	65	62	59	56	53	50	47	45	42	39	36	33	30	27	24	21	18	15	12	9	6	4
90	90	87	84	81	78	75	72	69	66	63	60	57	54	51	48	45	42	39	36	33	30	27	24	21	18	15	12	9	6	4
91	91	88	85	82	79	76	73	70	67	64	61	58	55	52	49	46	42	39	36	33	30	27	24	21	18	15	12	9	6	4
92	92	89	86	83	80	77	74	71	67	64	61	58	55	52	49	46	43	40	37	34	31	28	25	22	19	16	13	10	6	4
93	93	90	87	84	81	77	74	71	68	65	62	59	56	53	50	47	43	40	37	34	31	28	25	22	19	15	12	9	6	4
94	94	91	88	85	81	78	75	72	69	66	63	60	56	53	50	47	44	41	38	34	31	28	25	22	19	16	13	9	6	4
95	95	92	89	86	82	79	76	73	70	67	63	60	57	54	51	48	44	41	38	35	32	29	25	22	19	16	13	10	6	4
96	96	93	90	86	83	80	77	74	70	67	64	61	58	54	51	48	45	42	38	35	32	29	26	22	19	16	13	10	6	4
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99	99	96	92	89	86	82	79	76	73	69	66	63	59	56	53	50	46	43	40	36	33	30	26	23	20	16	13	10	7	4
100	100	97	93	90	87	83	80	77	73	70	67	63	60	57	53	50	47	43	40	37	33	30	27	23	20	17	13	10	7	4
101	101	98	94	91	88	84	81	77	74	71	67	64	61	57	54	51	47	44	40	37	34	30	27	24	20	17	13	10	7	4
102	102	99	95	92	88	85	82	78	75	71	68	65	61	58	54	51	48	44	41	37	34	31	27	24	20	17	14	10	7	4
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105	105	101	98	95	91	87	84	80	77	74	70	66	63	59	56	53	49	45	42	38	35	32	28	24	21	17	14	11	7	4
106	106	102	99	95	92	88	85	81	78	74	71	67	64	60	57	53	49	46	42	39	35	32	28	25	21	18	14	11	7	4
107	107	103	100	96	93	89	86	82	78	75	71	68	64	61	57	54	50	46	43	39	36	32	29	25	21	18	14	11	7	4
108	108	104	101	97	94	90	86	83	79	76	72	68	65	61	58	54	50	47	43	40	36	32	29	25	22	18	14	11	7	4
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113	113	109	105	102	98	94	90	87	83	79	75	72	68	64	60	57	53	49	45	41	38	34	30	26	23	19	15	11	8	4
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115	115	111	107	104	100	96	92	88	84	81	77	73	69	65	61	58	54	50	46	42	38	35	31	27	23	19	15	12	8	4
116	116	112	108	104	101	97	93	89	85	81	77	73	70	66	62	58	54	50	46	43	39	35	31	27	23	19	15	12	8	4
117	117	113	109	105	101	97	94	90	86	82	78	74	70	66	62	59	55	51	47	43	39	35	31	27	23	19	16	12	8	4
118	118	114	110	106	102	98	94	90	87	83	79	75	71	67	63	59	55	51	47	43	39	35	31	28	24	20	16	12	8	4
119	119	115	111	107	103	99	95	91	87	83	79	75	71	67	63	60	56	52	48	44	40	36	32	28	24	20	16	12	8	4
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FOOD STAMP ALLOTMENT PRORATION TABLE

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
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122	122	118	114	110	106	102	98	94	89	85	81	77	73	69	65	61	57	53	49	45	41	37	33	29	25	21	17	13	8	4
123	123	119	115	111	107	102	98	94	90	86	82	78	74	70	66	62	57	53	49	45	41	37	33	29	25	21	17	13	8	4
124	124	120	116	112	107	103	99	95	91	87	83	79	74	70	66	62	58	54	50	45	41	37	33	29	25	21	17	13	8	4
125	125	121	117	113	108	104	100	96	92	88	83	79	75	71	67	63	58	54	50	46	42	38	33	29	25	21	17	13	8	4
126	126	122	118	113	109	105	101	97	92	88	84	80	76	71	67	63	59	55	50	46	42	38	34	29	25	21	17	13	8	4
127	127	123	119	114	110	106	102	97	93	89	85	80	76	72	68	64	59	55	51	47	42	38	34	30	25	21	17	13	8	4
128	128	124	119	115	111	107	102	98	94	90	85	81	77	73	68	64	60	55	51	47	43	38	34	30	26	21	17	13	8	4
129	129	125	120	116	112	107	103	99	95	90	86	82	77	73	69	65	60	56	52	47	43	39	34	30	26	21	17	13	8	4
130	130	126	121	117	113	108	104	100	95	91	87	82	78	74	69	65	61	56	52	48	43	39	35	30	26	22	17	13	8	4
131	131	127	122	118	114	109	105	100	96	92	87	83	79	74	70	66	61	57	52	48	44	39	35	31	26	22	17	13	8	4
132	132	128	123	119	114	110	106	101	97	92	88	84	79	75	70	66	62	57	53	48	44	40	35	31	26	22	18	13	8	4
133	133	129	124	120	115	111	106	102	98	93	89	84	80	75	71	67	62	58	53	49	44	40	35	31	27	22	18	13	8	4
134	134	130	125	121	116	112	107	103	98	94	89	85	80	76	71	67	63	58	54	49	45	40	36	31	27	22	18	13	8	4
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136	136	131	127	122	118	113	109	104	100	95	91	86	82	77	73	68	63	59	54	50	45	41	36	32	27	23	18	14	9	6
137	137	132	128	123	119	114	110	105	100	96	91	87	82	78	73	69	64	59	55	50	46	41	37	32	27	23	18	14	9	6
138	138	133	129	124	120	115	110	106	101	97	92	87	83	78	74	69	64	60	55	51	46	41	37	32	28	23	18	14	9	6
139	139	134	130	125	120	116	111	107	102	97	93	88	83	79	74	70	65	60	56	51	46	42	37	32	28	23	19	14	9	6
140	140	135	131	126	121	117	112	107	103	98	93	89	84	79	75	70	65	61	56	51	47	42	37	33	28	23	19	14	9	6
141	141	136	132	127	122	117	113	108	103	99	94	89	85	80	75	71	66	61	56	52	47	42	38	33	28	23	19	14	9	6
142	142	137	133	128	123	118	114	109	104	99	95	90	85	80	76	71	66	62	57	52	47	43	38	33	28	24	19	14	9	6
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145	145	140	135	131	126	121	116	111	106	102	97	92	87	82	77	73	68	63	58	53	48	44	39	34	29	24	19	15	10	6
146	146	141	136	131	127	122	117	112	107	102	97	92	88	83	78	73	68	63	58	54	49	44	39	34	29	24	19	15	10	6
147	147	142	137	132	127	122	118	113	108	103	98	93	88	83	78	74	69	64	59	54	49	44	39	34	29	24	20	15	10	6
148	148	143	138	133	128	123	118	113	109	104	99	94	89	84	79	74	69	64	59	54	49	44	39	35	30	25	20	15	10	6
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150	150	145	140	135	130	125	120	115	110	105	100	95	90	85	80	75	70	65	60	55	50	45	40	35	30	25	20	15	10	6
151	151	146	141	136	131	126	121	116	111	106	101	96	91	86	81	76	70	65	60	55	50	45	40	35	30	25	20	15	10	6
152	152	147	142	137	132	127	122	117	111	106	101	96	91	86	81	76	71	66	61	56	51	46	41	35	30	25	20	15	10	6
153	153	148	143	138	133	127	122	117	112	107	102	97	92	87	82	77	71	66	61	56	51	46	41	36	31	25	20	15	10	6
154	154	149	144	139	133	128	123	118	113	108	103	98	92	87	82	77	72	67	62	56	51	46	41	36	31	26	21	15	10	6
155	155	150	145	140	134	129	124	119	114	109	103	98	93	88	83	78	72	67	62	57	52	47	41	36	31	26	21	16	10	6
156	156	151	146	140	135	130	125	120	114	109	104	99	94	88	83	78	73	68	62	57	52	47	42	36	31	26	21	16	10	6
157	157	152	147	141	136	131	126	120	115	110	105	99	94	89	84	79	73	68	63	58	52	47	42	37	31	26	21	16	10	6
158	158	153	147	142	137	132	126	121	116	111	105	100	95	90	84	79	74	68	63	58	53	47	42	37	32	26	21	16	11	6
159	159	154	148	143	138	132	127	122	117	111	106	101	95	90	85	80	74	69	64	58	53	48	42	37	32	26	21	16	11	6
160	160	155	149	144	139	133	128	123	117	112	107	101	96	91	85	80	75	69	64	59	53	48	43	37	32	27	21	16	11	6

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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
161	161	156	150	145	140	134	129	123	118	113	107	102	97	91	86	81	75	70	64	59	54	48	43	38	32	27	21	16	11	6
162	162	157	151	146	140	135	130	124	119	113	108	103	97	92	86	81	76	70	65	59	54	49	43	38	32	27	22	16	11	6
163	163	158	152	147	141	136	130	125	120	114	109	103	98	92	87	82	76	71	65	60	54	49	43	38	33	27	22	16	11	6
164	164	159	153	148	142	137	131	126	120	115	109	104	98	93	87	82	77	71	66	60	55	49	44	38	33	27	22	16	11	6
165	165	159	154	149	143	137	132	126	121	116	110	104	99	93	88	83	77	71	66	60	55	50	44	38	33	27	22	17	11	6
166	166	160	155	149	144	138	133	127	122	116	111	105	100	94	89	83	77	72	66	61	55	50	44	39	33	28	22	17	11	6
167	167	161	156	150	145	139	134	128	122	117	111	106	100	95	89	84	78	72	67	61	56	50	45	39	33	28	22	17	11	6
168	168	162	157	151	146	140	134	129	123	118	112	106	101	95	90	84	78	73	67	62	56	50	45	39	34	28	22	17	11	6
169	169	163	158	152	146	141	135	130	124	118	113	107	101	96	90	85	79	73	68	62	56	51	45	39	34	28	23	17	11	6
170	170	164	159	153	147	142	136	130	125	119	113	108	102	96	91	85	79	74	68	62	57	51	45	40	34	28	23	17	11	6
171	171	165	160	154	148	142	137	131	125	120	114	108	103	97	91	86	80	74	68	63	57	51	46	40	34	29	23	17	11	6
172	172	166	161	155	149	143	138	132	126	120	115	109	103	97	92	86	80	75	69	63	57	52	46	40	34	29	23	17	11	6
173	173	167	161	156	150	144	138	133	127	121	115	110	104	98	92	87	81	75	69	63	58	52	46	40	35	29	23	17	12	6
174	174	168	162	157	151	145	139	133	128	122	116	110	104	99	93	87	81	75	70	64	58	52	46	41	35	29	23	17	12	6
175	175	169	163	158	152	146	140	134	128	123	117	111	105	99	93	88	82	76	70	64	58	53	47	41	35	29	23	18	12	6
176	176	170	164	158	153	147	141	135	129	123	117	111	106	100	94	88	82	76	70	65	59	53	47	41	35	29	23	18	12	6
177	177	171	165	159	153	147	142	136	130	124	118	112	106	100	94	89	83	77	71	65	59	53	47	41	35	29	24	18	12	6
178	178	172	166	160	154	148	142	136	131	125	119	113	107	101	95	89	83	77	71	65	59	53	47	42	36	30	24	18	12	6
179	179	173	167	161	155	149	143	137	131	125	119	113	107	101	95	90	84	78	72	66	60	54	48	42	36	30	24	18	12	6
180	180	174	168	162	156	150	144	138	132	126	120	114	108	102	96	90	84	78	72	66	60	54	48	42	36	30	24	18	12	6
181	181	175	169	163	157	151	145	139	133	127	121	115	109	103	97	91	84	78	72	66	60	54	48	42	36	30	24	18	12	6
182	182	176	170	164	158	152	146	140	133	127	121	115	109	103	97	91	85	79	73	67	61	55	49	42	36	30	24	18	12	6
183	183	177	171	165	159	152	146	140	134	128	122	116	110	104	98	92	85	79	73	67	61	55	49	43	37	30	24	18	12	6
184	184	178	172	166	159	153	147	141	135	129	123	117	110	104	98	92	86	80	74	67	61	55	49	43	37	31	25	18	12	6
185	185	179	173	167	160	154	148	142	136	130	123	117	111	105	99	93	86	80	74	68	62	56	49	43	37	31	25	19	12	6
186	186	180	174	167	161	155	149	143	136	130	124	118	112	105	99	93	87	81	74	68	62	56	50	43	37	31	25	19	12	6
187	187	181	175	168	162	156	150	143	137	131	125	118	112	106	100	94	87	81	75	69	62	56	50	44	37	31	25	19	12	6
188	188	182	175	169	163	157	150	144	138	132	125	119	113	107	100	94	88	81	75	69	63	56	50	44	38	31	25	19	13	6
189	189	183	176	170	164	157	151	145	139	132	126	120	113	107	101	95	88	82	76	69	63	57	50	44	38	31	25	19	13	6
190	190	184	177	171	165	158	152	146	139	133	127	120	114	108	101	95	89	82	76	70	63	57	51	44	38	32	25	19	13	6
191	191	185	178	172	166	159	153	146	140	134	127	121	115	108	102	96	89	83	76	70	64	57	51	45	38	32	25	19	13	6
192	192	186	179	173	166	160	154	147	141	134	128	122	115	109	102	96	90	83	77	70	64	58	51	45	38	32	26	19	13	6
193	193	187	180	174	167	161	154	148	142	135	129	122	116	109	103	97	90	84	77	71	64	58	51	45	39	32	26	19	13	6
194	194	188	181	175	168	162	155	149	142	136	129	123	116	110	103	97	91	84	78	71	65	58	52	45	39	32	26	19	13	6
195	195	189	182	176	169	162	156	149	143	137	130	123	117	110	104	98	91	84	78	71	65	59	52	45	39	32	26	19	13	6
196	196	189	183	176	170	163	157	150	144	137	131	124	118	111	105	98	91	85	78	72	65	59	52	46	39	33	26	20	13	7
197	197	190	184	177	171	164	158	151	144	138	131	125	118	112	105	99	92	85	79	72	66	59	53	46	39	33	26	20	13	7
198	198	191	185	178	172	165	158	152	145	139	132	125	119	112	106	99	92	86	79	73	66	59	53	46	40	33	26	20	13	7
199	199	192	186	179	172	166	159	153	146	139	133	126	119	113	106	100	93	86	80	73	66	60	53	46	40	33	27	20	13	7
200	200	193	187	180	173	167	160	153	147	140	133	127	120	113	107	100	93	87	80	73	67	60	53	47	40	33	27	20	13	7

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FOOD STAMP ALLOTMENT PRORATION TABLE

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
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202	202	195	189	182	175	168	162	155	148	141	135	128	121	114	108	101	94	88	81	74	67	61	54	47	40	34	27	20	13	7
203	203	196	189	183	176	169	162	156	149	142	135	129	122	115	108	102	95	88	81	74	68	61	54	47	41	34	27	20	14	7
204	204	197	190	184	177	170	163	156	150	143	136	129	122	116	109	102	95	88	82	75	68	61	54	48	41	34	27	20	14	7
205	205	198	191	185	178	171	164	157	150	144	137	130	123	115	109	103	96	89	82	75	68	62	55	48	41	34	27	21	14	7
206	206	199	192	185	179	172	165	158	151	144	137	130	124	117	110	103	96	89	82	76	69	62	55	48	41	34	27	21	14	7
207	207	200	193	186	179	172	166	159	152	145	138	131	124	117	110	104	97	90	83	76	69	62	55	48	41	34	28	21	14	7
208	208	201	194	187	180	173	166	159	153	146	139	132	125	118	111	104	97	90	83	76	69	62	55	49	42	35	28	21	14	7
209	209	202	195	188	181	174	167	160	153	146	139	132	125	118	111	105	98	91	84	77	70	63	56	49	42	35	28	21	14	7
210	210	203	196	189	182	175	168	161	154	147	140	133	126	119	112	105	98	91	84	77	70	63	56	49	42	35	28	21	14	7
211	211	204	197	190	183	176	169	162	155	148	141	134	127	120	113	106	98	91	84	77	70	63	56	49	42	35	28	21	14	7
212	212	205	198	191	184	177	170	163	155	148	141	134	127	120	113	106	99	92	85	78	71	64	57	49	42	35	28	21	14	7
213	213	206	199	192	185	177	170	163	156	149	142	135	128	121	114	107	99	92	85	78	71	64	57	50	43	35	28	21	14	7
214	214	207	200	193	185	178	171	164	157	150	143	136	128	121	114	107	100	93	86	78	71	64	57	50	43	36	29	21	14	7
215	215	208	201	194	186	179	172	165	158	151	143	136	129	122	115	108	100	93	86	79	72	65	57	50	43	36	29	22	14	7
216	216	209	202	194	187	180	173	166	158	151	144	137	130	122	115	108	101	94	86	79	72	65	58	50	43	36	29	22	14	7
217	217	210	203	195	188	181	174	166	159	152	145	137	130	123	116	109	101	94	87	80	72	65	58	51	43	36	29	22	14	7
218	218	211	203	196	189	182	174	167	160	153	145	138	131	124	116	109	102	94	87	80	73	65	58	51	44	36	29	22	15	7
219	219	212	204	197	190	182	175	168	161	153	146	139	131	124	117	110	102	95	88	80	73	66	58	51	44	36	29	22	15	7
220	220	213	205	198	191	183	176	169	161	154	147	139	132	125	117	110	103	95	88	81	73	66	59	51	44	37	29	22	15	7
221	221	214	206	199	192	184	177	169	162	155	147	140	133	125	118	111	103	96	88	81	74	66	59	52	44	37	29	22	15	7
222	222	215	207	200	192	185	178	170	163	155	148	141	133	126	118	111	104	96	89	81	74	67	59	52	44	37	30	22	15	7
223	223	216	208	201	193	186	178	171	164	156	149	141	134	126	119	112	104	97	89	82	74	67	59	52	45	37	30	22	15	7
224	224	217	209	202	194	187	179	172	164	157	149	142	134	127	119	112	105	97	90	82	75	67	60	52	45	37	30	22	15	7
225	225	217	210	203	195	187	180	172	165	158	150	142	135	127	120	113	105	97	90	82	75	68	60	52	45	37	30	23	15	7
226	226	218	211	203	196	188	181	173	166	158	151	143	136	128	121	113	105	98	90	83	75	68	60	53	45	38	30	23	15	8
227	227	219	212	204	197	189	182	174	166	159	151	144	136	129	121	114	106	98	91	83	76	68	61	53	45	38	30	23	15	8
228	228	220	213	205	198	190	182	175	167	160	152	144	137	129	122	114	106	99	91	84	76	68	61	53	46	39	30	23	15	8
229	229	221	214	206	198	191	183	176	168	160	153	145	137	130	122	115	107	99	92	84	76	69	61	53	46	39	31	23	15	8
230	230	222	215	207	199	192	184	176	169	161	153	146	138	130	123	115	107	100	92	84	77	69	61	54	46	38	31	23	15	8
231	231	223	216	208	200	192	185	177	169	162	154	146	139	131	123	116	108	100	92	85	77	69	62	54	46	38	31	23	15	8
232	232	224	217	209	201	193	186	178	170	162	155	147	139	131	124	116	108	101	93	85	77	70	62	54	46	39	31	23	15	8
233	233	225	217	210	202	194	186	179	171	163	155	148	140	132	124	117	109	101	93	85	78	70	62	54	47	39	31	23	16	8
234	234	226	218	211	203	195	187	179	172	164	156	148	140	133	125	117	109	101	94	86	78	70	62	55	47	39	31	23	16	8
235	235	227	219	212	204	196	188	180	172	165	157	149	141	133	125	118	110	102	94	86	78	71	63	55	47	39	31	24	16	8
236	236	228	220	212	205	197	189	181	173	165	157	149	142	134	126	118	110	102	94	87	79	71	63	55	47	39	31	24	16	8
237	237	229	221	213	205	197	190	182	174	166	158	150	142	134	126	119	111	103	95	87	79	71	63	55	47	39	32	24	16	8
238	238	230	222	214	206	198	190	182	175	167	159	151	143	135	127	119	111	103	95	87	79	71	63	56	48	40	32	24	16	8
239	239	231	223	215	207	199	191	183	175	167	159	151	143	135	127	120	112	104	96	88	80	72	64	56	48	40	32	24	16	8
240	240	232	224	216	208	200	192	184	176	168	160	152	144	136	128	120	112	104	96	88	80	72	64	56	48	40	32	24	16	8

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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
241	241	233	225	217	209	201	193	185	177	169	161	153	145	137	129	121	112	104	96	88	80	72	64	56	48	40	32	24	16	8
242	242	234	226	218	210	202	194	186	177	169	161	153	145	137	129	121	113	105	97	89	81	73	65	56	48	40	32	24	16	8
243	243	235	227	219	211	202	194	186	178	170	162	154	146	138	130	122	113	105	97	89	81	73	65	57	49	40	32	24	16	8
244	244	236	228	220	211	203	195	187	179	171	163	155	146	138	130	122	114	106	98	89	81	73	65	57	49	41	33	24	16	8
245	245	237	229	221	212	204	196	188	180	172	163	155	147	139	131	123	114	106	98	90	82	74	65	57	49	41	33	25	16	8
246	246	238	230	221	213	205	197	189	180	172	164	156	148	139	131	123	115	107	98	50	82	74	66	57	49	41	33	25	15	8
247	247	239	231	222	214	206	198	189	181	173	165	156	148	140	132	124	115	107	99	91	82	74	66	58	49	41	33	25	15	8
248	248	240	231	223	215	207	198	190	182	174	165	157	149	141	132	124	116	107	99	91	83	74	66	58	50	41	33	25	17	8
249	249	241	232	224	216	207	199	191	183	174	166	158	149	141	133	125	116	108	100	91	83	75	66	58	50	41	33	25	17	8
250	250	242	233	225	217	208	200	192	183	175	167	158	150	142	133	125	117	108	100	92	83	75	67	58	50	42	33	25	17	8
251	251	243	234	226	218	209	201	192	184	176	167	159	151	142	134	126	117	109	100	92	84	75	67	59	50	42	33	25	17	8
252	252	244	235	227	218	210	202	193	185	176	168	160	151	143	134	126	118	109	101	92	84	76	67	59	50	42	34	25	17	8
253	253	245	236	228	219	211	202	194	186	177	169	160	152	143	135	127	118	110	101	93	84	76	67	59	51	42	34	25	17	8
254	254	246	237	229	220	212	203	195	186	178	169	161	152	144	135	127	119	110	102	93	85	76	68	59	51	42	34	25	17	8
255	255	248	238	230	221	212	204	195	187	179	170	161	153	144	136	128	119	110	102	93	85	77	68	59	51	42	34	26	17	8
256	256	247	239	230	222	213	205	196	188	179	171	162	154	145	137	128	119	111	102	94	85	77	68	60	51	43	34	26	17	9
257	257	248	240	231	223	214	206	197	188	180	171	163	154	146	137	129	120	111	103	94	86	77	69	60	51	43	34	26	17	9
258	258	249	241	232	224	215	206	198	189	181	172	163	155	146	138	129	120	112	103	95	86	77	69	60	52	43	34	26	17	9
259	259	250	242	233	224	216	207	199	190	181	173	164	155	147	138	130	121	112	104	95	86	78	69	60	52	43	35	26	17	9
260	260	251	243	234	225	217	208	199	191	182	173	165	156	147	139	130	121	113	104	95	87	78	69	61	52	43	35	26	17	9
261	261	252	244	235	226	217	209	200	191	183	174	165	157	148	139	131	122	113	104	96	87	78	70	61	52	43	35	26	17	9
262	262	253	245	236	227	218	210	201	192	183	175	166	157	148	140	131	122	114	105	96	87	79	70	61	52	44	35	26	17	9
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264	264	255	246	238	229	220	211	202	194	185	176	167	158	150	141	132	123	114	106	97	88	79	70	62	53	44	35	26	18	9
265	265	256	247	239	230	221	212	203	194	186	177	168	159	150	141	133	124	115	106	97	88	80	71	62	53	44	35	27	18	9
266	266	257	248	239	231	222	213	204	195	186	177	168	160	151	142	133	124	115	106	98	89	80	71	62	53	44	35	27	16	9
267	267	258	249	240	231	222	214	205	196	187	178	169	160	151	142	134	125	116	107	98	89	80	71	62	53	44	36	27	18	9
268	268	259	250	241	232	223	214	205	197	188	179	170	161	152	143	134	125	116	107	98	89	80	71	63	54	45	36	27	18	9
269	269	260	251	242	233	224	215	206	197	188	179	170	161	152	143	135	126	117	108	99	90	81	72	63	54	45	36	27	18	9
270	270	261	252	243	234	225	216	207	198	189	180	171	162	153	144	135	126	117	108	99	90	81	72	63	54	45	36	27	18	9
271	271	262	253	244	235	226	217	208	199	190	181	172	163	154	145	136	126	117	108	99	90	81	72	63	54	45	36	27	18	9
272	272	263	254	245	236	227	218	209	199	190	181	172	163	154	145	136	127	118	109	100	91	82	73	63	54	45	36	27	18	9
273	273	264	255	246	237	227	219	209	200	191	182	173	164	155	146	137	127	118	109	100	91	82	73	64	55	45	36	27	18	9
274	274	265	256	247	237	228	219	210	201	192	183	174	164	155	146	137	128	119	110	100	91	82	73	64	55	46	37	27	18	9
275	275	266	257	248	238	229	220	211	202	193	183	174	165	156	147	138	128	119	110	101	92	83	73	64	55	46	37	28	18	9
276	276	267	258	248	239	230	221	212	202	193	184	175	166	156	147	138	129	120	110	101	92	83	74	64	55	46	37	28	18	9
277	277	268	259	249	240	231	222	212	203	194	185	175	166	157	148	139	129	120	111	102	92	83	74	65	55	46	37	28	18	9
278	278	269	259	249	241	232	222	213	204	195	185	176	167	158	148	139	130	120	111	102	93	83	74	65	56	46	37	28	19	9
279	279	270	260	251	242	232	223	214	205	195	186	177	167	158	149	140	130	121	112	102	93	84	74	65	56	46	37	28	19	9
280	280	271	261	252	243	233	224	215	205	196	187	177	168	159	149	140	131	121	112	103	93	84	75	65	56	47	37	28	19	9

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MONTHLY ALLOTMENT	DATE OF APPLICATION																														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31	
281	281	272	262	253	244	234	225	215	206	197	187	178	169	159	150	141	131	122	112	103	94	84	75	66	56	47	37	28	19	9	
282	282	273	263	254	244	235	226	216	207	197	188	179	169	160	150	141	132	122	113	103	94	85	75	66	56	47	38	28	19	9	
283	283	274	264	255	245	236	226	217	208	198	189	179	170	160	151	142	132	123	113	104	94	85	75	66	57	47	38	28	19	9	
284	284	275	265	256	246	237	227	218	208	199	189	180	170	161	151	142	133	123	114	104	95	85	76	66	57	47	38	28	19	9	
285	285	275	266	257	247	237	228	218	209	190	180	171	161	152	143	133	123	114	104	95	86	76	66	57	47	38	29	19	9		
286	286	276	267	257	248	238	229	219	210	200	191	181	172	162	153	143	133	124	114	105	95	86	76	67	57	48	38	29	19	10	
287	287	277	268	258	249	239	230	220	210	201	191	182	172	163	153	144	134	124	115	105	96	86	77	67	57	48	38	29	19	10	
288	288	278	269	259	250	240	230	221	211	202	192	182	173	163	154	144	134	125	115	106	96	86	77	67	58	48	38	29	19	10	
289	289	279	270	260	250	241	231	222	212	202	193	183	173	164	154	145	135	125	116	106	96	87	77	67	58	48	39	29	19	10	
290	290	280	271	261	251	242	232	222	213	203	193	184	174	164	155	145	135	126	116	106	97	87	77	68	58	48	39	29	19	10	
291	291	281	272	262	252	242	233	223	213	204	194	184	175	165	155	146	136	126	116	107	97	87	78	68	58	48	39	29	19	10	
292	292	282	273	263	253	243	234	224	214	204	195	185	175	165	156	146	136	127	117	107	97	88	78	68	58	49	39	29	19	10	
293	293	283	273	264	254	244	234	225	215	205	195	186	176	166	156	147	137	127	117	107	98	88	78	68	59	49	39	29	20	10	
294	294	284	274	265	255	245	235	225	216	206	196	186	176	167	157	147	137	127	118	108	98	88	78	69	59	49	39	29	20	10	
295	295	285	275	266	256	246	236	226	216	207	197	187	177	167	157	148	138	128	118	108	98	89	79	69	59	49	39	30	20	10	
296	296	286	276	266	257	247	237	227	217	207	197	187	178	168	158	148	138	128	118	109	99	89	79	69	59	49	39	30	20	10	
297	297	287	277	267	257	247	238	228	218	208	198	188	178	168	158	149	139	129	119	109	99	89	79	69	59	49	40	30	20	10	
298	298	288	278	268	258	248	238	228	219	209	199	189	179	169	159	149	139	129	119	109	99	89	79	70	60	50	40	30	20	10	
299	299	289	279	269	259	249	239	229	219	209	199	189	179	169	159	150	140	130	120	110	100	90	80	70	60	50	40	30	20	10	
300	300	290	280	270	260	250	240	230	220	210	200	190	180	170	160	150	140	130	120	110	100	90	80	70	60	50	40	30	20	10	
301	301	291	281	271	261	251	241	231	221	211	201	191	181	171	161	151	141	131	121	111	101	90	80	70	60	50	40	30	20	10	
302	302	292	282	272	262	252	242	232	222	212	202	192	182	172	162	152	142	132	122	112	102	91	81	70	60	50	40	30	20	10	
303	303	293	283	273	263	253	243	233	223	213	203	193	183	173	163	153	143	133	123	113	103	91	81	71	61	50	40	30	20	10	
304	304	294	284	274	264	254	244	234	224	214	204	194	184	174	164	154	144	134	124	114	104	92	82	72	62	51	41	30	20	10	
305	305	295	285	275	265	255	245	235	225	215	205	195	185	175	165	155	145	135	125	115	105	92	82	71	61	51	41	31	20	10	
306	306	296	286	276	266	256	246	236	226	216	206	196	186	176	166	156	146	136	126	116	106	92	82	71	61	51	41	31	20	10	
307	307	297	287	276	266	256	246	236	226	216	206	196	186	176	166	156	146	136	126	116	106	92	82	72	61	51	41	31	20	10	
308	308	298	287	277	267	257	246	236	226	216	206	196	186	176	166	156	146	136	126	116	106	92	82	72	62	51	41	31	21	10	
309	309	299	288	278	268	257	247	237	227	216	206	196	186	176	166	156	146	136	126	116	106	93	82	72	62	51	41	31	21	10	
310	310	300	289	279	269	258	248	238	227	217	207	196	186	176	166	156	146	136	126	116	106	93	83	72	62	52	41	31	21	10	
311	311	301	290	280	270	259	249	238	228	218	207	197	187	176	166	156	146	136	126	116	106	93	83	73	62	52	41	31	21	10	
312	312	302	291	281	270	260	250	239	229	218	208	198	187	177	166	156	146	136	126	116	106	94	83	73	62	52	42	31	21	10	
313	313	303	292	282	271	261	250	240	230	219	209	198	188	177	167	157	146	136	126	116	106	94	83	73	63	52	42	31	21	10	
314	314	304	293	283	272	262	251	241	230	220	209	199	188	178	167	157	147	136	126	116	106	94	84	73	63	52	42	31	21	10	
315	315	304	294	284	273	262	252	241	231	221	210	199	189	178	168	158	147	136	126	116	106	95	84	73	63	52	42	32	21	10	
316	316	305	295	284	274	263	253	242	232	221	211	200	190	179	169	158	147	137	126	116	106	95	84	74	63	53	42	32	21	11	
317	317	306	296	285	275	264	254	243	233	222	211	201	190	180	169	159	148	137	127	116	106	95	85	74	63	53	42	32	21	11	
318	318	307	297	286	276	265	254	244	233	223	212	201	191	180	170	159	148	138	127	117	106	95	85	74	64	53	42	32	21	11	
319	319	308	298	287	276	266	255	245	234	223	213	202	191	181	170	160	149	138	128	117	106	96	85	74	64	53	43	32	21	11	
320	320	309	299	288	277	267	256	245	235	224	213	203	192	181	171	160	149	139	128	117	107	96	85	75	64	53	43	32	21	11	

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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
321	321	310	300	289	278	267	257	246	235	225	214	203	193	182	171	161	150	139	128	118	107	96	86	75	64	53	43	32	21	11
322	322	311	301	290	279	268	258	247	236	225	215	204	193	182	172	161	150	140	129	118	107	97	86	75	64	54	43	32	21	11
323	323	312	301	291	280	269	258	248	237	226	215	205	194	183	172	162	151	140	129	118	108	97	86	75	65	54	43	32	22	11
324	324	313	302	292	281	270	259	248	238	227	216	205	194	184	173	162	151	140	130	119	108	97	86	76	65	54	43	32	22	11
325	325	314	303	293	282	271	260	249	238	228	217	206	195	184	173	163	152	141	130	119	108	98	87	76	65	54	43	33	22	11
326	326	315	304	293	283	272	261	250	239	228	217	206	196	185	174	163	152	141	130	120	109	98	87	76	65	54	43	33	22	11
327	327	316	305	294	283	272	262	251	240	229	218	207	196	185	174	164	153	142	131	120	109	98	87	76	65	54	44	33	22	11
328	328	317	306	295	284	273	262	251	241	230	219	208	197	186	175	164	153	142	131	120	109	98	87	77	66	55	44	33	22	11
329	329	318	307	296	285	274	263	252	241	230	219	208	197	186	175	165	154	143	132	121	110	99	88	77	66	55	44	33	22	11
330	330	319	308	297	286	275	264	253	242	231	220	209	198	187	176	165	154	143	132	121	110	99	88	77	66	55	44	33	22	11
331	331	320	309	298	287	276	265	254	243	232	221	210	199	188	177	166	154	143	132	121	110	99	88	77	66	55	44	33	22	11
332	332	321	310	299	288	277	266	255	243	232	221	210	199	188	177	166	155	144	133	122	111	100	89	77	66	55	44	33	22	11
333	333	322	311	300	289	277	266	255	244	233	222	211	200	189	178	167	155	144	133	122	111	100	89	78	67	55	44	33	22	11
334	334	323	312	301	289	278	267	256	245	234	223	212	200	189	178	167	156	145	134	122	111	100	89	78	67	56	45	33	22	11
335	335	324	313	302	290	279	268	257	246	235	223	212	201	190	179	168	156	145	134	123	112	101	89	78	67	56	45	34	22	11
336	336	325	314	302	291	280	269	258	246	235	224	213	202	190	179	168	157	146	134	123	112	101	90	78	67	56	45	34	22	11
337	337	326	315	303	292	281	270	258	247	236	225	213	202	191	180	169	157	146	135	124	112	101	90	79	67	56	45	34	22	11
338	338	327	315	304	293	282	270	259	248	237	225	214	203	192	180	169	158	146	135	124	113	101	90	79	68	56	45	34	23	11
339	339	328	316	305	294	282	271	260	249	237	226	215	203	192	181	170	158	147	136	124	113	102	90	79	68	56	45	34	23	11
340	340	329	317	306	295	283	272	261	249	238	227	215	204	193	181	170	159	147	136	125	113	102	91	79	68	57	45	34	23	11
341	341	330	318	307	296	284	273	261	250	239	227	216	205	193	182	171	159	148	136	125	114	102	91	80	68	57	45	34	23	11
342	342	331	319	308	296	285	274	262	251	239	228	217	205	194	182	171	160	148	137	125	114	103	91	80	68	57	46	34	23	11
343	343	332	320	309	297	286	274	263	252	240	229	217	206	194	183	172	160	149	137	126	114	103	91	80	69	57	46	34	23	11
344	344	333	321	310	298	287	275	264	252	241	229	218	206	195	183	172	161	149	138	126	115	103	92	80	69	57	46	34	23	11
345	345	333	322	311	299	287	276	264	253	242	230	218	207	195	184	173	161	149	138	126	115	104	92	80	69	57	46	35	23	11
346	346	334	323	311	300	288	277	265	254	242	231	219	208	196	185	173	161	150	138	127	115	104	92	81	69	58	46	35	23	12
347	347	335	324	312	301	289	278	266	254	243	231	220	209	197	185	174	162	150	139	127	116	104	93	81	69	58	46	35	23	12
348	348	336	325	313	302	290	278	267	255	244	232	220	209	197	186	174	162	151	139	128	116	104	93	81	70	58	46	35	23	12
349	349	337	326	314	302	291	279	268	256	244	233	221	209	198	186	175	163	151	140	128	116	105	93	81	70	58	47	35	23	12
350	350	338	327	315	303	292	280	268	257	245	233	222	210	198	187	175	163	152	140	128	117	105	93	82	70	58	47	35	23	12
351	351	339	328	316	304	292	281	269	257	246	234	222	211	199	187	176	164	152	140	129	117	105	94	82	70	58	47	35	23	12
352	352	340	329	317	305	293	282	270	258	246	235	223	211	199	188	176	164	153	141	129	117	106	94	82	70	59	47	35	23	12
353	353	341	329	318	306	294	282	271	259	247	235	224	212	200	188	177	165	153	141	129	118	106	94	82	71	59	47	35	24	12
354	354	342	330	319	307	295	283	271	260	248	236	224	212	201	189	177	165	153	142	130	118	106	94	83	71	59	47	35	24	12
355	355	343	331	320	308	296	284	272	260	249	237	225	213	201	189	178	166	154	142	130	118	107	95	83	71	59	47	36	24	12
356	356	344	332	320	309	297	285	273	261	249	237	225	214	202	190	178	166	154	142	131	119	107	95	83	71	59	47	36	24	12
357	357	345	333	321	309	297	286	274	262	250	238	226	214	202	190	179	167	155	143	131	119	107	95	83	71	59	48	36	24	12
358	358	346	334	322	310	298	286	274	263	251	239	227	215	203	191	179	167	155	143	131	119	107	95	84	72	60	48	36	24	12
359	359	347	335	323	311	299	287	275	263	251	239	227	215	203	191	180	168	156	144	132	120	108	96	84	72	60	48	36	24	12
360	360	348	336	324	312	300	288	276	264	252	240	228	216	204	192	180	168	156	144	132	120	108	96	84	72	60	48	36	24	12

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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
361	361	349	337	325	313	301	289	277	265	253	241	229	217	205	193	181	168	156	144	132	120	108	96	84	72	60	48	36	24	12
362	362	350	338	326	314	302	290	278	266	254	242	230	218	206	194	182	169	157	145	133	121	109	97	85	73	60	48	36	24	12
363	363	351	339	327	315	302	290	278	266	254	242	230	218	206	194	182	169	157	145	133	121	109	97	85	73	60	48	36	24	12
364	364	352	340	328	315	303	291	279	267	255	243	231	218	206	194	182	170	158	146	133	121	109	97	85	73	61	49	36	24	12
365	365	353	341	329	316	304	292	280	268	256	243	231	219	207	195	183	170	158	146	134	122	110	97	85	73	61	49	37	24	12
366	366	354	342	329	317	305	293	281	268	256	244	232	220	207	195	183	171	159	146	134	122	110	98	85	73	61	49	37	24	12
367	367	355	343	330	318	306	294	281	269	257	245	232	220	208	196	184	171	159	147	135	122	110	98	86	73	61	49	37	24	12
368	368	356	343	331	319	307	294	282	270	258	245	233	221	209	196	184	172	159	147	135	123	110	98	86	74	61	49	37	25	12
369	369	357	344	332	320	307	295	283	271	258	246	234	221	209	197	185	172	160	148	135	123	111	98	86	74	61	49	37	25	12
370	370	358	345	333	321	308	296	284	271	259	247	234	222	210	197	185	173	160	148	136	123	111	99	86	74	62	49	37	25	12
371	371	359	346	334	322	309	297	284	272	260	247	235	223	210	198	186	173	161	148	136	124	111	99	87	74	62	49	37	25	12
372	372	360	347	335	322	310	298	285	273	260	248	236	223	211	198	186	174	161	149	136	124	112	99	87	74	62	50	37	25	12
373	373	361	348	336	323	311	298	286	274	261	249	236	224	211	199	187	174	162	149	137	124	112	99	87	75	62	50	37	25	12
374	374	362	349	337	324	312	299	287	274	262	249	237	224	212	199	187	175	162	150	137	125	112	100	87	75	62	50	37	25	12
375	375	362	350	338	325	312	300	287	275	263	250	237	225	212	200	188	175	162	150	137	125	113	100	87	75	62	50	38	25	12
376	376	363	351	338	326	313	301	288	276	263	251	238	226	213	201	188	175	163	150	138	125	113	100	88	75	63	50	38	25	13
377	377	364	352	339	327	314	302	289	276	264	251	239	226	214	201	189	176	163	151	138	126	113	101	88	75	63	50	38	25	13
378	378	365	353	340	328	315	302	290	277	265	252	239	227	214	202	189	176	164	151	139	126	113	101	88	76	63	50	38	25	13
379	379	366	354	341	328	316	303	291	278	265	253	240	227	215	202	190	177	164	152	139	126	114	101	88	76	63	51	38	25	13
380	380	367	355	342	329	317	304	291	279	266	253	241	228	215	203	190	177	165	152	139	127	114	101	89	76	63	51	38	25	13
381	381	368	356	343	330	317	305	292	279	267	254	241	229	216	203	191	178	165	152	140	127	114	102	89	76	63	51	38	25	13
382	382	369	357	344	331	318	306	293	280	267	255	242	229	216	204	191	178	166	153	140	127	115	102	89	76	64	51	38	25	13
383	383	370	357	345	332	319	306	294	281	268	255	243	230	217	204	192	179	166	153	140	128	115	102	89	77	64	51	38	26	13
384	384	371	358	346	333	320	307	294	282	269	256	243	230	218	205	192	179	166	154	141	128	115	102	90	77	64	51	38	26	13
385	385	372	359	347	334	321	308	295	282	270	257	244	231	218	205	193	180	167	154	141	128	116	103	90	77	64	51	39	26	13
386	386	373	360	347	335	322	309	296	283	270	257	244	232	219	206	193	180	167	154	142	129	116	103	90	77	64	51	39	26	13
387	387	374	361	348	335	322	310	297	284	271	258	245	232	219	206	194	181	168	155	142	129	116	103	90	77	64	52	39	26	13
388	388	375	362	349	336	323	310	297	285	272	259	246	233	220	207	194	181	168	155	142	129	116	103	91	78	65	52	39	26	13
389	389	376	363	350	337	324	311	298	285	272	259	246	233	220	207	195	182	169	156	143	130	117	104	91	78	65	52	39	26	13
390	390	377	364	351	338	325	312	299	286	273	260	247	234	221	208	195	182	169	156	143	130	117	104	91	78	65	52	39	26	13
391	391	378	365	352	339	326	313	300	287	274	261	248	235	222	209	196	182	169	156	143	130	117	104	91	78	65	52	39	26	13
392	392	379	366	353	340	327	314	301	287	274	261	248	235	222	209	196	182	169	157	144	131	118	105	91	78	65	52	39	26	13
393	393	380	367	354	341	327	314	301	288	275	262	249	236	223	210	197	183	170	157	144	131	118	105	92	79	65	52	39	26	13
394	394	381	368	355	341	328	315	302	289	276	263	250	236	223	210	197	184	171	158	144	131	118	105	92	79	66	53	39	26	13
395	395	382	369	356	342	329	316	303	290	277	263	250	237	224	211	198	184	171	158	145	132	119	105	92	79	66	53	40	26	13
396	396	383	370	356	343	330	317	304	290	277	264	251	238	224	211	198	185	172	158	145	132	119	106	92	79	66	53	40	26	13
397	397	384	371	357	344	331	318	304	291	278	265	251	238	225	212	199	185	172	159	146	132	119	106	93	79	66	53	40	26	13
398	398	385	371	358	345	332	318	305	292	279	265	252	239	226	212	199	186	172	159	146	133	119	106	93	80	66	53	40	27	13
399	399	386	372	359	346	332	319	306	293	279	266	253	239	226	213	200	186	173	160	146	133	120	106	93	80	66	53	40	27	13
400	400	387	373	360	347	333	320	307	293	280	267	253	240	227	213	200	187	173	160	147	133	120	107	93	80	67	53	40	27	13

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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
401	401	398	374	361	348	334	321	307	294	281	267	254	241	227	214	201	187	174	160	147	134	120	107	94	80	67	53	40	27	13
402	402	389	375	362	348	335	322	308	295	281	268	255	241	228	214	201	188	174	161	147	134	121	107	94	80	67	54	40	27	13
403	403	390	376	363	349	336	322	309	296	282	269	255	242	228	215	202	188	175	161	148	134	121	107	94	81	67	54	40	27	13
404	404	391	377	364	350	337	323	310	296	283	269	256	242	229	215	202	189	175	162	148	135	121	108	94	81	67	54	40	27	13
405	405	391	378	365	351	337	324	310	297	284	270	256	243	229	216	203	189	175	162	148	135	122	108	94	81	67	54	41	27	13
406	406	392	379	365	352	338	325	311	298	284	271	257	244	230	217	203	189	176	162	149	135	122	108	95	81	68	54	41	27	14
407	407	393	380	366	353	339	326	312	298	285	271	258	244	231	217	204	190	176	163	149	136	122	109	95	81	68	54	41	27	14
408	408	394	381	367	354	340	326	313	299	286	272	258	245	231	218	204	190	177	163	150	136	122	109	95	82	68	54	41	27	14
409	409	395	382	368	354	341	327	314	300	286	273	259	245	232	218	205	191	177	164	150	136	123	109	95	82	68	55	41	27	14
410	410	396	383	369	355	342	328	314	301	287	273	260	246	232	219	205	191	178	164	150	137	123	109	96	82	68	55	41	27	14
411	411	397	384	370	356	342	329	315	301	288	274	260	247	233	219	206	192	178	164	151	137	123	110	96	82	68	55	41	27	14
412	412	398	385	371	357	343	330	316	302	288	275	261	247	233	220	206	192	179	165	151	137	124	110	96	82	69	55	41	27	14
413	413	399	385	372	358	344	330	317	303	289	275	262	248	234	220	207	193	179	165	151	138	124	110	96	83	69	55	41	28	14
414	414	400	386	373	359	345	331	317	304	290	276	262	248	235	221	207	193	179	166	152	138	124	110	97	83	69	55	41	28	14
415	415	401	387	374	360	346	332	318	304	291	277	263	249	235	221	208	194	180	166	152	138	125	111	97	83	69	55	42	28	14
416	416	402	388	374	361	347	333	319	305	291	277	263	250	236	222	208	194	180	166	153	139	125	111	97	83	69	55	42	28	14
417	417	403	389	375	361	347	334	320	306	292	278	264	250	236	222	209	195	181	167	153	139	125	111	97	83	69	56	42	28	14
418	418	404	390	376	362	348	334	320	307	293	279	265	251	237	223	209	195	181	167	153	139	125	111	98	84	70	56	42	28	14
419	419	405	391	377	363	349	335	321	307	293	279	265	251	237	223	210	196	182	168	154	140	126	112	98	84	70	56	42	28	14
420	420	406	392	378	364	350	336	322	308	294	280	266	252	238	224	210	196	182	168	154	140	126	112	98	84	70	56	42	28	14
421	421	407	393	379	365	351	337	323	309	295	281	267	253	239	225	211	196	182	168	154	140	126	112	98	84	70	56	42	28	14
422	422	408	394	380	366	352	338	324	309	295	281	267	253	239	225	211	197	183	169	155	141	127	113	98	84	70	56	42	28	14
423	423	409	395	381	367	352	338	324	310	296	282	268	254	240	226	212	197	183	169	155	141	127	113	99	85	70	56	42	28	14
424	424	410	396	382	367	353	339	325	311	297	283	269	254	240	226	212	198	184	170	155	141	127	113	99	85	71	57	42	28	14
425	425	411	397	383	368	354	340	326	312	298	283	269	255	241	227	213	198	184	170	155	142	128	113	99	85	71	57	43	28	14
426	426	412	398	383	369	355	341	327	312	298	284	270	256	241	227	213	199	185	170	156	142	128	114	99	85	71	57	43	28	14
427	427	413	399	384	370	356	342	327	313	299	285	270	256	242	228	214	199	185	171	157	142	128	114	100	85	71	57	43	28	14
428	428	414	399	385	371	357	342	328	314	300	285	271	257	243	228	214	200	185	171	157	143	128	114	100	86	71	57	43	29	14
429	429	415	400	386	372	357	343	329	315	300	286	272	257	243	229	215	200	186	172	157	143	129	114	100	86	71	57	43	29	14
430	430	416	401	387	373	358	344	330	315	301	287	272	258	244	229	215	201	186	172	158	143	129	115	100	86	72	57	43	29	14
431	431	417	402	388	374	359	345	330	316	302	287	273	259	244	230	216	201	187	172	158	144	129	115	101	86	72	57	43	29	14
432	432	418	403	389	374	360	346	331	317	302	288	274	259	245	230	216	202	187	173	158	144	130	115	101	86	72	58	43	29	14
433	433	419	404	390	375	361	346	332	318	303	289	274	260	245	231	217	202	188	173	159	144	130	115	101	87	72	58	43	29	14
434	434	420	405	391	376	362	347	333	318	304	289	275	260	246	231	217	203	188	174	159	145	130	116	101	87	72	58	43	29	14
435	435	420	406	392	377	362	348	333	319	305	290	275	261	246	232	218	203	188	174	159	145	131	116	101	87	72	58	44	29	14
436	436	421	407	392	378	363	349	334	320	305	291	276	262	247	233	218	203	189	174	160	145	131	116	102	87	73	58	44	29	15
437	437	422	408	393	379	364	350	335	320	306	291	277	262	248	233	219	204	189	175	160	146	131	117	102	87	73	58	44	29	15
438	438	423	409	394	380	365	350	336	321	307	292	277	263	248	234	219	204	190	175	161	146	131	117	102	88	73	58	44	29	15
439	439	424	410	395	380	366	351	337	322	307	293	278	263	249	234	220	205	190	176	161	146	132	117	102	88	73	59	44	29	15
440	440	425	411	396	381	367	352	337	323	308	293	279	264	249	235	220	205	191	176	161	147	132	117	103	88	73	59	44	29	15

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FOOD STAMP ALLOTMENT PRORATION TABLE

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
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442	442	427	413	398	383	368	354	339	324	309	295	280	265	250	236	221	206	192	177	162	147	133	118	103	88	74	59	44	29	15
443	443	428	413	399	384	369	354	340	325	310	295	281	266	251	236	222	207	192	177	162	148	133	118	103	89	74	59	44	30	15
444	444	429	414	400	385	370	355	340	326	311	296	281	266	252	237	222	207	192	178	163	148	133	118	104	89	74	59	44	30	15
445	445	430	415	401	386	371	356	341	326	312	297	282	267	252	237	223	208	193	178	163	148	134	119	104	89	74	59	45	30	15
446	446	431	416	401	387	372	357	342	327	312	297	282	268	253	238	223	208	193	178	164	149	134	119	104	89	74	59	45	30	15
447	447	432	417	402	387	372	358	343	328	313	298	283	268	253	238	224	209	194	179	164	149	134	119	104	89	74	60	45	30	15
448	448	433	418	403	388	373	358	343	329	314	299	284	269	254	239	224	209	194	179	164	149	134	119	105	90	75	60	45	30	15
449	449	434	419	404	389	374	359	344	329	314	299	284	269	254	239	225	210	195	180	165	150	135	120	105	90	75	60	45	30	15
450	450	435	420	405	390	375	360	345	330	315	300	285	270	255	240	225	210	195	180	165	150	135	120	105	90	75	60	45	30	15
451	451	436	421	406	391	376	361	346	331	316	301	286	271	256	241	226	210	195	180	165	150	135	120	105	90	75	60	45	30	15
452	452	437	422	407	392	377	362	347	331	316	301	286	271	256	241	226	211	196	181	166	151	136	121	105	90	75	60	45	30	15
453	453	438	423	408	393	377	362	347	332	317	302	287	272	257	242	227	211	196	181	166	151	136	121	106	91	75	60	45	30	15
454	454	439	424	409	393	378	363	348	333	318	303	288	272	257	242	227	212	197	182	166	151	136	121	106	91	76	61	45	30	15
455	455	440	425	410	394	379	364	349	334	319	303	288	273	258	243	228	212	197	182	167	152	137	121	106	91	76	61	46	30	15
456	456	441	426	410	395	380	365	350	334	319	304	289	274	258	243	228	213	198	182	167	152	137	122	106	91	76	61	46	30	15
457	457	442	427	411	396	381	366	350	335	320	305	289	274	259	244	229	213	198	183	168	152	137	122	107	91	76	61	46	30	15
458	458	443	427	412	397	382	366	351	336	321	305	290	275	260	244	229	214	198	183	168	153	137	122	107	92	76	61	46	31	15
459	459	444	428	413	398	382	367	352	337	321	306	291	275	260	245	230	214	199	184	168	153	138	122	107	92	76	61	46	31	15
460	460	445	429	414	399	383	368	353	337	322	307	291	276	261	245	230	215	199	184	169	153	138	123	107	92	77	61	46	31	15
461	461	446	430	415	400	384	369	353	338	323	307	292	277	261	246	231	215	200	184	169	154	138	123	108	92	77	61	46	31	15
462	462	447	431	416	400	385	370	354	339	323	308	293	277	262	246	231	216	200	185	169	154	139	123	108	92	77	62	46	31	15
463	463	448	432	417	401	386	370	355	340	324	309	293	278	262	247	232	216	201	185	170	154	139	123	108	93	77	62	46	31	15
464	464	449	433	418	402	387	371	356	340	325	309	294	278	263	247	232	217	201	186	170	155	139	124	108	93	77	62	46	31	15
465	465	449	434	419	403	387	372	356	341	326	310	294	279	263	248	233	217	201	186	170	155	140	124	108	93	77	62	47	31	15
466	466	450	435	419	404	388	373	357	342	326	311	295	280	264	249	233	217	202	186	171	155	140	124	109	93	78	62	47	31	16
467	467	451	436	420	405	389	374	358	342	327	311	296	280	265	249	234	218	202	187	171	156	140	125	109	93	78	62	47	31	16
468	468	452	437	421	406	390	374	359	343	328	312	296	281	265	250	234	218	203	187	172	156	140	125	109	94	78	62	47	31	16
469	469	453	438	422	406	391	375	360	344	328	313	297	281	266	250	235	219	203	188	172	156	141	125	109	94	78	63	47	31	16
470	470	454	439	423	407	392	376	360	345	329	313	298	282	266	251	235	219	204	188	172	157	141	125	110	94	78	63	47	31	16
471	471	455	440	424	408	392	377	361	345	330	314	299	283	267	251	236	220	204	188	173	157	141	126	110	94	78	63	47	31	16
472	472	456	441	425	409	393	378	362	346	330	315	299	283	267	252	236	220	205	189	173	157	142	126	110	94	79	63	47	31	16
473	473	457	441	426	410	394	378	363	347	331	315	300	284	268	252	237	221	205	189	173	158	142	126	110	94	79	63	47	32	16
474	474	458	442	427	411	395	379	363	348	332	316	300	284	269	253	237	221	205	190	174	158	142	126	111	95	79	63	47	32	16
475	475	459	443	428	412	396	380	364	348	333	317	301	285	269	253	238	222	206	190	174	158	143	127	111	95	79	63	48	32	16
476	476	460	444	428	413	397	381	365	349	333	317	301	236	270	254	238	222	206	190	175	159	143	127	111	95	79	63	48	32	16
477	477	461	445	429	413	397	382	366	350	334	318	302	286	270	254	239	223	207	191	175	159	143	127	111	95	79	64	48	32	16
478	478	462	446	430	414	398	382	366	351	335	319	303	287	271	255	239	223	207	191	175	159	143	127	112	96	80	64	48	32	16
479	479	463	447	431	415	399	383	367	351	335	319	303	287	271	255	240	224	208	192	176	160	144	128	112	96	80	64	48	32	16
480	480	464	448	432	416	400	384	368	352	336	320	304	288	272	256	240	224	208	192	176	160	144	128	112	96	80	64	48	32	16

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FOOD STAMP PROGRAM

DETERMINING HOUSEHOLD ELIGIBILITY AND BENEFIT LEVEL (13 of 23)

Chapter 364

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FOOD STAMP ALLOTMENT PRORATION TABLE

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
481	481	465	449	433	417	401	385	369	353	337	321	305	289	273	257	241	224	208	192	176	160	144	128	112	96	80	64	48	32	16
482	482	466	450	434	418	402	386	370	354	338	322	306	290	274	258	242	225	209	193	177	161	145	129	113	97	81	65	49	33	17
483	483	467	451	435	419	403	387	371	355	339	323	307	291	275	259	243	226	210	194	178	162	146	130	114	98	82	66	50	34	18
484	484	468	452	436	420	404	388	372	356	340	324	308	292	276	260	244	228	212	196	180	164	148	132	116	100	84	68	52	36	20
485	485	469	453	437	421	405	389	373	357	341	325	309	293	277	261	245	229	213	197	181	165	149	133	117	101	85	69	53	37	21
486	486	470	454	438	422	406	390	374	358	342	326	310	294	278	262	246	230	214	198	182	166	150	134	118	102	86	70	54	38	22
487	487	471	455	439	423	407	391	375	359	343	327	311	295	279	263	247	231	215	199	183	167	151	135	119	103	87	71	55	39	23
488	488	472	456	440	424	408	392	376	360	344	328	312	296	280	264	248	232	216	200	184	168	152	136	120	104	88	72	56	40	24
489	489	473	457	441	425	409	393	377	361	345	329	313	297	281	265	249	233	217	201	185	169	153	137	121	105	89	73	57	41	25
490	490	474	458	442	426	410	394	378	362	346	330	314	298	282	266	250	234	218	202	186	170	154	138	122	106	90	74	58	42	26
491	491	475	459	443	427	411	395	379	363	347	331	315	299	283	267	251	235	219	203	187	171	155	139	123	107	91	75	59	43	27
492	492	476	460	444	428	412	396	380	364	348	332	316	300	284	268	252	236	220	204	188	172	156	140	124	108	92	76	60	44	28
493	493	477	461	445	429	413	397	381	365	349	333	317	301	285	269	253	237	221	205	189	173	157	141	125	109	93	77	61	45	29
494	494	478	462	446	430	414	398	382	366	350	334	318	302	286	270	254	238	222	206	190	174	158	142	126	110	94	78	62	46	30
495	495	479	463	447	431	415	399	383	367	351	335	319	303	287	271	255	239	223	207	191	175	159	143	127	111	95	79	63	47	31
496	496	480	464	448	432	416	400	384	368	352	336	320	304	288	272	256	240	224	208	192	176	160	144	128	112	96	80	64	48	32
497	497	481	465	449	433	417	401	385	369	353	337	321	305	289	273	257	241	225	209	193	177	161	145	129	113	97	81	65	49	33
498	498	482	466	450	434	418	402	386	370	354	338	322	306	290	274	258	242	226	210	194	178	162	146	130	114	98	82	66	50	34
499	499	483	467	451	435	419	403	387	371	355	339	323	307	291	275	259	243	227	211	195	179	163	147	131	115	99	83	67	51	35
500	500	484	468	452	436	420	404	388	372	356	340	324	308	292	276	260	244	228	212	196	180	164	148	132	116	100	84	68	52	36
501	501	485	469	453	437	421	405	389	373	357	341	325	309	293	277	261	245	229	213	197	181	165	149	133	117	101	85	69	53	37
502	502	486	470	454	438	422	406	390	374	358	342	326	310	294	278	262	246	230	214	198	182	166	150	134	118	102	86	70	54	38
503	503	487	471	455	439	423	407	391	375	359	343	327	311	295	279	263	247	231	215	199	183	167	151	135	119	103	87	71	55	39
504	504	488	472	456	440	424	408	392	376	360	344	328	312	296	280	264	248	232	216	200	184	168	152	136	120	104	88	72	56	40
505	505	489	473	457	441	425	409	393	377	361	345	329	313	297	281	265	249	233	217	201	185	169	153	137	121	105	89	73	57	41
506	506	490	474	458	442	426	410	394	378	362	346	330	314	298	282	266	250	234	218	202	186	170	154	138	122	106	90	74	58	42
507	507	491	475	459	443	427	411	395	379	363	347	331	315	299	283	267	251	235	219	203	187	171	155	139	123	107	91	75	59	43
508	508	492	476	460	444	428	412	396	380	364	348	332	316	300	284	268	252	236	220	204	188	172	156	140	124	108	92	76	60	44
509	509	493	477	461	445	429	413	397	381	365	349	333	317	301	285	269	253	237	221	205	189	173	157	141	125	109	93	77	61	45
510	510	494	478	462	446	430	414	398	382	366	350	334	318	302	286	270	254	238	222	206	190	174	158	142	126	110	94	78	62	46
511	511	495	479	463	447	431	415	399	383	367	351	335	319	303	287	271	255	239	223	207	191	175	159	143	127	111	95	79	63	47
512	512	496	480	464	448	432	416	400	384	368	352	336	320	304	288	272	256	240	224	208	192	176	160	144	128	112	96	80	64	48
513	513	497	481	465	449	433	417	401	385	369	353	337	321	305	289	273	257	241	225	209	193	177	161	145	129	113	97	81	65	49
514	514	498	482	466	450	434	418	402	386	370	354	338	322	306	290	274	258	242	226	210	194	178	162	146	130	114	98	82	66	50
515	515	499	483	467	451	435	419	403	387	371	355	339	323	307	291	275	259	243	227	211	195	179	163	147	131	115	99	83	67	51
516	516	500	484	468	452	436	420	404	388	372	356	340	324	308	292	276	260	244	228	212	196	180	164	148	132	116	100	84	68	52
517	517	501	485	469	453	437	421	405	389	373	357	341	325	309	293	277	261	245	229	213	197	181	165	149	133	117	101	85	69	53
518	518	502	486	470	454	438	422	406	390	374	358	342	326	310	294	278	262	246	230	214	198	182	166	150	134	118	102	86	70	54
519	519	503	487	471	455	439	423	407	391	375	359	343	327	311	295	279	263	247	231	215	199	183	167	151	135	119	103	87	71	55
520	520	504	488	472	456	440	424	408	392	376	360	344	328	312	296	280	264	248	232	216	200	184	168	152	136	120	104	88	72	56

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FOOD STAMP PROGRAM

DETERMINING HOUSEHOLD ELIGIBILITY AND BENEFIT LEVEL (14 of 23)

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Page 364.990

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
521	521	504	486	469	451	434	417	399	382	365	347	330	313	295	278	261	243	226	208	191	174	156	139	122	104	87	69	52	35	17
522	522	505	487	470	452	435	418	400	383	365	348	331	313	296	278	261	244	226	209	191	174	157	139	122	104	87	70	52	35	17
523	523	506	488	471	453	436	418	401	384	366	349	331	314	296	279	262	244	227	209	192	174	157	139	122	105	87	70	52	35	17
524	524	506	489	472	454	437	419	402	384	367	349	332	314	297	279	262	244	227	210	192	175	157	140	122	105	87	70	52	35	17
525	525	507	490	473	455	437	420	402	385	368	350	332	315	297	280	263	245	227	210	192	175	158	140	122	105	87	70	53	35	17
526	526	508	491	473	456	438	421	403	386	368	351	333	316	298	281	263	245	228	210	193	175	158	140	123	105	89	70	53	35	18
527	527	509	492	474	457	439	422	404	386	369	351	334	316	299	281	264	246	228	211	193	176	158	140	123	105	88	70	53	35	18
528	528	510	493	475	458	440	422	405	387	370	352	334	317	299	282	264	246	229	211	194	176	158	141	123	106	88	70	53	35	18
529	529	511	494	476	458	441	423	406	388	370	353	335	317	300	282	265	247	229	212	194	176	159	141	123	106	88	71	53	35	18
530	530	512	495	477	459	442	424	406	389	371	353	336	318	300	283	265	247	230	212	194	177	159	141	124	106	88	71	53	35	18
531	531	513	496	478	460	442	425	407	389	372	354	336	319	301	283	266	248	230	212	195	177	159	142	124	106	88	71	53	35	18
532	532	514	497	479	461	443	426	408	390	372	355	337	319	301	284	266	248	231	213	195	177	160	142	124	106	89	71	53	35	18
533	533	515	497	480	462	444	426	409	391	373	355	338	320	302	284	267	249	231	213	195	178	160	142	124	107	89	71	53	35	18
534	534	516	498	481	463	445	427	409	392	374	356	338	320	303	285	267	249	231	214	196	178	160	142	125	107	89	71	53	36	18
535	535	517	499	482	464	446	428	410	392	375	357	339	321	303	285	268	250	232	214	196	178	161	143	125	107	89	71	54	36	18
536	536	518	500	482	464	447	429	411	393	375	357	339	322	304	286	268	250	232	214	196	179	161	143	125	107	89	71	54	36	18
537	537	519	501	483	465	447	430	412	394	376	358	340	322	304	286	269	251	233	215	197	179	161	143	125	107	89	72	54	36	18
538	538	520	502	484	466	448	430	412	395	377	359	341	323	305	287	269	251	233	215	197	179	161	143	126	108	90	72	54	36	18
539	539	521	503	485	467	449	431	413	395	377	359	341	323	305	287	270	251	234	216	198	180	162	144	126	108	90	72	54	36	18
540	540	522	504	486	468	450	432	414	396	378	360	342	324	306	288	270	252	234	216	198	180	162	144	126	108	90	72	54	36	18
541	541	523	505	487	469	451	433	415	397	379	361	343	325	307	289	271	252	234	216	198	180	162	144	126	108	90	72	54	36	18
542	542	524	506	488	470	452	434	415	397	379	361	343	325	307	289	271	253	235	217	199	181	163	144	126	108	90	72	54	36	18
543	543	525	507	489	471	452	434	416	398	380	362	344	326	308	290	272	253	235	217	199	181	163	145	127	109	90	72	54	36	18
544	544	526	508	490	471	453	435	417	399	381	363	345	326	308	290	272	254	236	218	199	181	163	145	127	109	91	73	54	36	18
545	545	527	509	491	472	454	436	418	400	382	363	345	327	309	291	273	254	236	218	200	182	164	145	127	109	91	73	55	36	18
546	546	528	510	491	473	455	437	419	400	382	364	346	328	309	291	273	255	237	218	200	182	164	146	127	109	91	73	55	36	18
547	547	529	511	492	474	456	438	419	401	383	365	346	328	310	292	274	255	237	219	201	182	164	146	128	109	91	73	55	36	18
548	548	530	511	493	475	457	438	420	402	384	365	347	329	310	292	274	256	237	219	201	183	164	146	128	110	91	73	55	36	18
549	549	531	512	494	476	457	439	421	403	384	366	348	329	311	293	275	256	238	220	201	183	165	146	128	110	91	73	55	37	18
550	550	532	513	495	477	458	440	422	403	385	367	348	330	312	293	275	257	238	220	202	183	165	147	128	110	92	73	55	37	18
551	551	533	514	496	477	459	441	422	404	386	367	349	331	312	294	276	257	239	220	202	184	165	147	129	110	92	73	55	37	18
552	552	534	515	497	478	460	442	423	405	386	368	350	331	313	294	276	258	239	221	202	184	166	147	129	110	92	74	55	37	18
553	553	535	516	498	479	461	442	424	406	387	369	350	332	313	295	277	258	240	221	203	184	166	147	129	111	92	74	55	37	18
554	554	535	517	499	480	462	443	425	406	388	369	351	332	314	295	277	258	240	222	203	185	166	148	129	111	92	74	55	37	18
555	555	536	518	500	481	462	444	425	407	389	370	351	333	314	296	278	259	240	222	203	185	167	148	129	111	92	74	56	37	18
556	556	537	519	500	482	463	445	426	408	389	371	352	334	315	297	278	259	241	222	204	185	167	148	130	111	93	74	56	37	19
557	557	538	520	501	483	464	446	427	408	390	371	353	334	316	297	279	260	241	223	204	186	167	148	130	111	93	74	56	37	19
558	558	539	521	502	484	465	446	428	409	391	372	353	335	316	298	279	260	242	223	205	186	167	149	130	112	93	74	56	37	19
559	559	540	522	503	484	466	447	429	410	391	373	354	335	317	298	280	261	242	224	205	186	168	149	130	112	93	75	56	37	19
560	560	541	523	504	485	467	448	429	411	392	373	355	336	317	299	280	261	243	224	205	187	168	149	131	112	93	75	56	37	19

FOOD STAMP ALLOTMENT PRORATION TABLE

FOOD STAMP ALLOTMENT PRORATION TABLE

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
561	561	542	524	505	486	467	449	430	411	393	374	355	337	318	299	281	262	243	224	206	187	168	150	131	112	93	75	56	37	19
562	562	543	525	506	487	468	450	431	412	393	375	356	337	318	300	281	262	244	225	206	187	169	150	131	112	94	75	56	37	19
563	563	544	525	507	488	469	450	432	413	394	375	357	338	319	300	282	263	244	225	206	188	169	150	131	113	94	75	56	37	19
564	564	545	526	508	489	470	451	432	414	395	376	357	338	320	301	282	263	244	226	207	188	169	150	132	113	94	75	56	38	19
565	565	546	527	509	490	471	452	433	414	396	377	358	339	320	301	283	264	245	226	207	188	170	151	132	113	94	75	57	38	19
566	566	547	528	509	490	472	453	434	415	396	377	358	340	321	302	283	264	245	226	207	189	170	151	132	113	94	75	57	38	19
567	567	548	529	510	491	472	454	435	416	397	378	359	340	321	302	284	265	246	227	208	189	170	151	132	113	94	76	57	38	19
568	568	549	530	511	492	473	454	435	417	398	379	360	341	322	303	284	265	246	227	208	189	170	151	133	114	95	76	57	38	19
569	569	550	531	512	493	474	455	436	417	398	379	360	341	322	303	285	265	247	228	209	190	171	152	133	114	95	76	57	38	19
570	570	551	532	513	494	475	456	437	418	399	380	361	342	323	304	285	266	247	228	209	190	171	152	133	114	95	76	57	39	19
571	571	552	533	514	495	476	457	438	419	400	381	362	343	324	305	286	266	247	228	209	190	171	152	133	114	95	76	57	38	19
572	572	553	534	515	496	477	458	439	419	400	381	362	343	324	305	286	267	248	229	210	191	172	152	133	114	95	76	57	38	19
573	573	554	535	516	497	477	458	439	420	401	382	363	344	325	306	287	267	248	229	210	191	172	153	134	115	95	76	57	38	19
574	574	555	536	517	497	478	459	440	421	402	383	364	344	325	306	287	268	249	230	210	191	172	153	134	115	96	77	57	38	19
575	575	556	537	518	498	479	460	441	422	403	383	364	345	326	307	288	268	249	230	211	192	173	153	134	115	96	77	58	38	19
576	576	557	538	518	499	480	461	442	422	403	384	365	346	326	307	288	269	250	230	211	192	173	154	134	115	96	77	58	38	19
577	577	558	539	519	500	481	462	442	423	404	385	365	346	327	308	289	269	250	231	212	192	173	154	135	115	96	77	58	38	19
578	578	559	539	520	501	482	462	443	424	405	385	366	347	327	308	289	270	250	231	212	193	173	154	135	116	96	77	58	38	19
579	579	560	540	521	502	482	463	444	425	405	386	367	347	328	309	290	270	251	232	212	193	174	154	135	116	96	77	58	39	19
580	580	561	541	522	503	483	464	445	425	406	387	367	348	329	309	290	271	251	232	213	193	174	155	135	116	97	77	58	39	19
581	581	562	542	523	503	484	465	445	426	407	387	368	349	329	310	291	271	252	232	213	194	174	155	136	116	97	77	58	39	19
582	582	563	543	524	504	485	466	446	427	407	388	369	349	330	310	291	272	252	233	213	194	175	155	136	116	97	78	58	39	19
583	583	564	544	525	505	486	466	447	428	408	389	369	350	330	311	292	272	253	233	214	194	175	155	136	117	97	78	58	39	19
584	584	564	545	526	506	487	467	448	428	409	389	370	350	331	311	292	272	253	234	214	195	175	156	136	117	97	78	58	39	19
585	585	565	546	527	507	487	468	448	429	410	390	370	351	331	312	293	273	253	234	214	195	176	156	136	117	97	78	59	39	19
586	586	566	547	527	508	488	469	449	430	410	391	371	352	332	313	293	273	254	234	215	195	176	156	137	117	98	78	59	39	20
587	587	567	548	528	509	489	470	450	430	411	391	372	352	333	313	294	274	254	235	215	196	176	156	137	117	98	78	59	39	20
588	588	568	549	529	510	490	470	451	431	412	392	372	353	333	314	294	274	255	235	216	196	176	157	137	118	98	78	59	39	20
589	589	569	550	530	510	491	471	452	432	412	393	373	353	334	314	295	275	255	236	216	196	177	157	137	118	99	79	59	39	20
590	590	570	551	531	511	492	472	452	433	413	393	374	354	334	315	295	275	256	236	216	197	177	157	138	118	98	79	59	39	20
591	591	571	552	532	512	492	473	453	433	414	394	374	355	335	315	296	276	256	236	217	197	177	158	138	118	98	79	59	39	20
592	592	572	553	533	513	493	474	454	434	414	395	375	355	335	316	296	276	257	237	217	197	178	158	138	118	99	79	59	39	20
593	593	573	553	534	514	494	474	455	435	415	395	376	356	336	316	297	277	257	237	217	198	178	158	138	119	99	79	59	39	20
594	594	574	554	535	515	495	475	455	436	416	396	376	356	337	317	297	277	257	238	218	198	178	158	139	119	99	79	59	40	20
595	595	575	555	536	516	496	476	456	436	417	397	377	357	337	317	298	278	258	238	218	198	179	159	139	119	99	79	60	40	20
596	596	576	556	536	516	497	477	457	437	417	397	377	358	338	318	298	278	258	238	218	199	179	159	139	119	99	79	60	40	20
597	597	577	557	537	517	497	478	458	438	418	398	378	358	338	318	299	279	259	239	219	199	179	159	139	119	99	80	60	40	20
598	598	578	558	538	518	498	478	458	439	419	399	379	359	339	319	299	279	259	239	219	199	179	159	140	120	100	80	60	40	20
599	599	579	559	539	519	499	479	459	439	419	399	379	359	339	319	300	279	260	240	220	200	180	160	140	120	100	80	60	40	20
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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
601	601	581	561	541	521	501	481	461	441	421	401	381	361	341	321	301	280	260	240	220	200	180	160	140	120	100	80	60	40	20
602	602	582	562	542	522	502	482	461	441	421	401	381	361	341	321	301	281	261	241	221	201	181	160	140	120	100	80	60	40	20
603	603	583	563	543	523	502	482	462	442	422	402	382	362	342	322	302	281	261	241	221	201	181	161	141	121	100	80	60	40	20
604	604	584	564	544	523	503	483	463	443	423	403	383	362	342	322	302	282	262	242	221	201	181	161	141	121	101	81	60	40	20
605	605	585	565	545	524	504	484	464	444	424	403	383	363	343	323	303	282	262	242	222	202	182	161	141	121	101	81	61	40	20
606	606	586	566	545	525	505	485	465	444	424	404	384	364	343	323	303	283	263	242	222	202	182	162	141	121	101	81	61	40	20
607	607	587	567	546	526	506	486	465	445	425	405	384	364	344	324	304	283	263	243	223	202	182	162	142	121	101	81	61	40	20
608	608	588	567	547	527	507	486	466	446	426	405	385	365	344	324	304	284	263	243	223	203	182	162	142	122	101	81	61	40	20
609	609	589	568	548	528	507	487	467	447	426	406	386	365	345	325	305	284	264	244	223	203	183	162	142	122	101	81	61	41	20
610	610	590	569	549	529	508	488	468	447	427	407	386	366	346	325	305	285	264	244	224	203	183	163	142	122	102	81	61	41	20
611	611	591	570	550	529	509	489	468	448	428	407	387	367	346	326	306	285	265	244	224	204	183	163	143	122	102	81	61	41	20
612	612	592	571	551	530	510	490	469	449	428	408	388	367	347	326	306	286	265	245	224	204	184	163	143	122	102	82	61	41	20
613	613	593	572	552	531	511	490	470	450	429	409	388	368	347	327	307	286	266	245	225	204	184	163	143	123	102	82	61	41	20
614	614	593	573	553	532	512	491	471	450	430	409	389	368	348	327	307	286	266	246	225	205	184	164	143	123	102	82	61	41	20
615	615	594	574	554	533	512	492	471	451	431	410	389	369	348	328	308	287	266	246	225	205	185	164	143	123	102	82	62	41	20
616	616	595	575	554	534	513	493	472	452	431	411	390	370	349	329	308	287	267	246	226	205	185	164	144	123	103	82	62	41	21
617	617	596	576	555	535	514	494	473	452	432	411	391	370	350	329	309	288	267	247	226	206	185	164	144	123	103	82	62	41	21
618	618	597	577	556	536	515	494	474	453	433	412	391	371	350	330	309	288	268	247	227	206	185	165	144	124	103	82	62	41	21
619	619	598	578	557	536	516	495	475	454	433	413	392	371	351	330	310	289	268	248	227	206	186	165	144	124	103	83	62	41	21
620	620	599	579	558	537	517	496	475	455	434	413	393	372	351	331	310	289	269	248	227	207	186	165	145	124	103	83	62	41	21
621	621	600	580	559	538	517	497	476	455	435	414	393	373	352	331	311	290	269	248	228	207	186	166	145	124	103	83	62	41	21
622	622	601	581	560	539	518	498	477	456	435	415	394	373	352	332	311	290	270	249	228	207	187	166	145	124	104	83	62	41	21
623	623	602	581	561	540	519	498	478	457	436	415	395	374	353	332	312	291	270	249	228	208	187	166	145	125	104	83	62	41	21
624	624	603	582	562	541	520	499	478	458	437	416	395	374	354	333	312	291	270	250	229	208	187	166	146	125	104	83	62	42	21
625	625	604	583	563	542	521	500	479	458	438	417	396	375	354	333	313	292	271	250	229	208	188	167	146	125	104	83	63	42	21
626	626	605	584	563	542	522	501	480	459	438	417	396	376	355	334	313	292	271	250	229	209	188	167	146	125	104	83	63	42	21
627	627	606	585	564	543	522	502	481	460	439	418	397	376	355	334	314	293	272	251	230	209	188	167	146	125	104	84	63	42	21
628	628	607	586	565	544	523	502	481	461	440	419	398	377	356	335	314	293	272	251	230	209	188	167	147	126	105	84	63	42	21
629	629	608	587	566	545	524	503	482	461	440	419	398	377	356	335	315	293	273	252	231	210	189	168	147	126	105	84	63	42	21
630	630	609	588	567	546	525	504	483	462	441	420	399	378	357	336	315	294	273	252	231	210	189	168	147	126	105	84	63	42	21
631	631	610	589	568	547	526	505	484	463	442	421	400	379	358	337	316	294	273	252	231	210	189	168	147	126	105	84	63	42	21
632	632	611	590	569	548	527	506	484	463	442	421	400	379	358	337	316	295	274	253	232	211	190	168	147	126	105	84	63	42	21
633	633	612	591	570	549	527	505	485	464	443	422	401	380	359	338	317	295	274	253	232	211	190	169	148	127	105	84	63	42	21
634	634	613	592	571	549	528	507	486	465	444	423	402	380	359	338	317	296	275	254	232	211	190	169	148	127	106	85	63	42	21
635	635	614	593	572	550	529	508	487	466	445	423	402	381	360	339	318	296	275	254	233	212	191	169	148	127	106	85	64	42	21
636	636	615	594	572	551	530	509	488	466	445	424	403	382	360	339	318	297	276	254	233	212	191	170	148	127	106	85	64	42	21
637	637	616	595	573	552	531	510	488	467	446	425	403	382	361	340	319	297	276	255	234	212	191	170	149	127	106	85	64	42	21
638	638	617	595	574	553	532	510	489	468	447	425	404	383	361	340	319	298	276	255	234	213	191	170	149	128	106	85	64	42	21
639	639	618	596	575	554	532	511	490	469	447	426	405	383	362	341	320	298	277	256	234	213	192	170	149	128	106	85	64	43	21
640	640	619	597	576	555	533	512	491	469	448	427	405	384	363	341	320	299	277	256	235	213	192	171	149	128	107	85	64	43	21

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FOOD STAMP ALLOTMENT PRORATION TABLE

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
641	641	620	598	577	555	534	513	491	470	449	427	406	385	363	342	321	299	278	256	235	214	192	171	150	128	107	85	64	43	21
642	642	621	599	578	556	535	514	492	471	449	428	407	385	364	342	321	300	278	257	235	214	193	171	150	128	107	86	64	43	21
643	643	622	600	579	557	536	514	493	472	450	429	407	386	364	343	322	300	279	257	236	214	193	171	150	129	107	86	64	43	21
644	644	622	601	580	558	537	515	494	472	451	429	408	386	365	343	322	300	279	258	236	215	193	172	150	129	107	86	64	43	21
645	645	623	602	581	559	537	516	494	473	452	430	408	387	365	344	323	301	279	258	236	215	194	172	150	129	107	86	65	43	21
646	646	624	603	581	560	538	517	495	474	452	431	409	388	366	345	323	301	280	258	237	215	194	172	151	129	108	86	65	43	22
647	647	625	604	582	561	539	518	496	474	453	431	410	388	367	345	324	302	280	259	237	216	194	172	151	129	108	86	65	43	22
648	648	626	605	583	562	540	518	497	475	454	432	410	389	367	346	324	302	281	259	238	216	194	173	151	130	109	86	65	43	22
649	649	627	606	584	562	541	519	498	476	454	433	411	389	368	346	325	303	281	260	238	216	195	173	151	130	108	87	65	43	22
650	650	628	607	585	563	542	520	498	477	455	433	412	390	368	347	325	303	282	260	238	217	195	173	152	130	109	87	65	43	22
651	651	629	608	586	564	542	521	499	477	456	434	412	391	369	347	326	304	282	260	239	217	195	174	152	130	109	87	65	43	22
652	652	630	609	587	565	543	522	500	478	456	435	413	391	369	348	326	304	283	261	239	217	196	174	152	130	109	87	65	43	22
653	653	631	609	588	566	544	522	501	479	457	435	414	392	370	348	327	305	283	261	239	218	196	174	152	131	109	87	65	43	22
654	654	632	610	589	567	545	523	501	480	458	436	414	392	371	349	327	305	283	262	240	218	196	174	153	131	109	87	65	44	22
655	655	633	611	590	568	546	524	502	480	459	437	415	393	371	349	328	306	284	262	240	218	197	175	153	131	109	87	66	44	22
656	656	634	612	590	568	547	525	503	481	459	437	415	394	372	350	328	306	284	262	240	219	197	175	153	131	109	87	66	44	22
657	657	635	613	591	569	547	526	504	482	460	438	416	394	372	350	329	307	285	263	241	219	197	175	153	131	109	88	66	44	22
658	658	636	614	592	570	548	526	504	483	461	439	417	395	373	351	329	307	285	263	241	219	197	175	154	132	110	88	66	44	22
659	659	637	615	593	571	549	527	505	483	461	439	417	395	373	351	330	307	286	264	242	220	198	176	154	132	110	88	66	44	22
660	660	638	616	594	572	550	528	506	484	462	440	418	396	374	352	330	308	286	264	242	220	198	176	154	132	110	88	66	44	22
661	661	639	617	595	573	551	529	507	485	463	441	419	397	375	353	331	308	286	264	242	220	198	176	154	132	110	88	66	44	22
662	662	640	618	596	574	552	530	507	485	463	441	419	397	375	353	331	309	287	265	243	221	199	176	154	132	110	88	66	44	22
663	663	641	619	597	575	552	530	508	486	464	442	420	398	376	354	332	309	287	265	243	221	199	177	155	133	110	88	66	44	22
664	664	642	620	598	575	553	531	509	487	465	443	421	398	376	354	332	310	288	266	243	221	199	177	155	133	111	89	66	44	22
665	665	643	621	599	576	554	532	510	488	466	443	421	399	377	355	333	310	288	266	244	222	200	177	155	133	111	89	67	44	22
666	666	644	622	599	577	555	533	511	488	466	444	422	400	377	355	333	311	289	266	244	222	200	178	155	133	111	89	67	44	22
667	667	645	623	600	578	556	534	511	489	467	445	422	400	378	356	334	311	289	267	245	222	200	178	156	133	111	89	67	44	22
668	668	646	623	601	579	557	534	512	490	468	445	423	401	378	356	334	312	289	267	245	223	200	178	156	134	111	89	67	44	22
669	669	647	624	602	580	557	535	513	491	468	446	424	401	379	357	335	312	290	268	245	223	201	178	156	134	111	89	67	45	22
670	670	648	625	603	581	558	536	514	491	469	447	424	402	380	357	335	313	290	268	246	223	201	179	156	134	112	89	67	45	22
671	671	649	626	604	581	559	537	514	492	470	447	425	403	380	358	336	313	291	268	246	224	201	179	157	134	112	89	67	45	22
672	672	650	627	605	582	560	538	515	493	470	448	426	403	381	358	336	314	291	269	246	224	202	179	157	134	112	90	67	45	22
673	673	651	628	606	583	561	538	516	494	471	449	426	404	381	359	337	314	292	269	247	224	202	179	157	135	112	90	67	45	22
674	674	651	629	607	584	562	539	517	494	472	449	427	404	382	359	337	314	292	270	247	225	202	180	157	135	112	90	67	45	22
675	675	652	630	608	585	562	540	517	495	473	450	427	405	382	360	338	315	292	270	247	225	203	180	157	135	112	90	68	45	22
676	676	653	631	608	586	563	541	518	496	473	451	428	406	383	361	338	315	293	270	248	225	203	180	158	135	113	90	68	45	23
677	677	654	632	609	587	564	542	519	496	474	451	429	406	384	361	339	316	293	271	248	226	203	180	158	135	113	90	68	45	23
678	678	655	633	610	588	565	542	520	497	475	452	429	407	384	362	339	316	294	271	249	226	203	181	158	136	113	90	68	45	23
679	679	656	634	611	588	566	543	521	498	475	453	430	407	385	362	340	317	294	272	249	226	204	181	158	136	113	91	68	45	23
680	680	657	635	612	589	567	544	521	499	476	453	431	408	385	363	340	317	295	272	249	227	204	181	159	136	113	91	68	45	23

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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
601	601	650	636	613	590	567	545	522	499	477	454	431	409	386	363	341	318	295	272	250	227	204	182	159	136	113	91	68	45	23
602	602	659	637	614	591	568	546	523	500	477	455	432	409	386	364	341	318	296	273	250	227	205	182	159	136	114	91	68	45	23
603	603	660	637	615	592	569	546	524	501	478	455	433	410	387	364	342	319	296	273	250	228	205	182	159	137	114	91	68	45	23
604	604	661	638	616	593	570	547	524	502	479	456	433	410	388	365	342	319	296	274	251	228	205	182	160	137	114	91	68	46	23
605	605	662	639	617	594	571	548	525	502	480	457	434	411	389	365	343	320	297	274	251	228	206	183	160	137	114	91	69	46	23
606	606	663	640	617	594	572	549	526	503	480	457	434	412	389	366	343	320	297	274	251	229	206	183	160	137	114	91	69	46	23
607	607	664	641	618	595	572	550	527	504	481	458	435	412	389	366	344	321	298	275	252	229	206	183	160	137	114	92	69	46	23
608	608	665	642	619	596	573	550	527	505	482	459	436	413	390	367	344	321	298	275	252	229	206	183	161	138	115	92	69	46	23
609	609	666	643	620	597	574	551	528	505	482	459	436	413	390	367	345	321	299	276	253	230	207	184	161	138	115	92	69	46	23
690	690	667	644	621	598	575	552	529	506	483	460	437	414	391	368	345	322	299	276	253	230	207	184	161	138	115	92	69	46	23
691	691	668	645	622	599	576	553	530	507	484	461	438	415	392	369	346	322	299	276	253	230	207	184	161	138	115	92	69	46	23
692	692	669	646	623	600	577	554	530	507	484	461	438	415	392	369	346	323	300	277	254	231	208	184	161	138	115	92	69	46	23
693	693	670	647	624	601	577	554	531	508	485	462	439	416	393	370	347	323	300	277	254	231	208	185	162	139	115	92	69	46	23
694	694	671	648	625	601	578	555	532	509	486	463	440	416	393	370	347	324	301	278	254	231	208	185	162	139	116	93	69	46	23
695	695	672	649	626	602	579	556	533	510	487	463	440	417	394	371	348	324	301	278	255	232	209	185	162	139	116	93	70	46	23
696	696	673	650	626	603	580	557	534	510	487	464	441	418	394	371	348	325	302	278	255	232	209	186	162	139	116	93	70	46	23
697	697	674	651	627	604	581	558	534	511	488	465	441	418	395	372	349	325	302	279	256	232	209	186	163	139	116	93	70	46	23
698	698	675	651	628	605	582	558	535	512	489	465	442	419	395	372	349	326	302	279	256	233	209	186	163	140	116	93	70	46	23
699	699	676	652	629	606	582	559	536	513	489	466	443	419	396	373	350	326	303	280	256	233	210	186	163	140	116	93	70	47	23
700	700	677	653	630	607	583	560	537	513	490	467	443	420	397	373	350	327	303	280	257	233	210	187	163	140	117	93	70	47	23
701	701	678	654	631	607	584	561	537	514	491	467	444	421	397	374	351	327	304	280	257	234	210	187	164	140	117	93	70	47	23
702	702	679	655	632	608	585	562	538	515	491	468	445	421	398	374	351	328	304	281	257	234	211	187	164	140	117	94	70	47	23
703	703	680	656	633	609	586	562	539	516	492	469	445	422	398	375	352	328	305	281	258	234	211	187	164	141	117	94	70	47	23
704	704	680	657	634	610	587	563	540	516	493	469	446	422	399	375	352	328	305	282	258	235	211	188	164	141	117	94	70	47	23
705	705	681	658	635	611	587	564	540	517	494	470	446	423	399	376	353	329	305	282	258	235	212	188	164	141	117	94	71	47	23
706	706	682	659	635	612	588	565	541	518	494	471	447	424	400	377	353	329	306	282	259	235	212	188	165	141	118	94	71	47	24
707	707	683	660	636	613	589	566	542	519	495	471	448	424	401	377	354	330	306	283	259	236	212	188	165	141	118	94	71	47	24
708	708	684	661	637	614	590	566	543	519	496	472	448	425	401	378	354	330	307	283	260	236	212	189	165	142	118	94	71	47	24
709	709	685	662	638	614	591	567	544	520	496	473	449	425	402	378	355	331	307	284	260	236	213	189	165	142	118	95	71	47	24
710	710	686	663	639	615	592	568	544	521	497	473	450	426	402	379	355	331	308	284	260	237	213	189	166	142	118	95	71	47	24
711	711	687	664	640	616	592	569	545	521	498	474	450	427	403	379	356	332	308	284	261	237	213	190	166	142	118	95	71	47	24
712	712	688	665	641	617	593	570	546	522	499	475	451	427	403	380	356	332	309	285	261	237	214	190	166	142	119	95	71	47	24
713	713	689	665	642	618	594	570	547	523	499	475	452	428	404	380	357	333	309	285	261	238	214	190	166	143	119	95	71	47	24
714	714	690	666	643	619	595	571	547	524	500	476	452	428	405	381	357	333	309	286	262	238	214	190	167	143	119	95	71	48	24
715	715	691	667	644	620	596	572	548	524	501	477	453	429	405	381	358	334	310	286	262	238	215	191	167	143	119	95	72	48	24
716	716	692	668	644	620	597	573	549	525	501	477	453	430	406	382	358	334	310	286	262	239	215	191	167	143	119	95	72	48	24
717	717	693	669	645	621	597	574	550	526	502	478	454	430	406	382	359	335	311	287	263	239	215	191	167	143	119	96	72	48	24
718	718	694	670	646	622	598	574	550	527	503	479	455	431	407	383	359	335	311	287	263	239	215	191	168	144	120	96	72	48	24
719	719	695	671	647	623	599	575	551	527	503	479	455	431	407	383	360	335	312	288	264	240	216	192	168	144	120	96	72	48	24
720	720	696	672	648	624	600	576	552	528	504	490	456	432	408	384	360	336	312	288	264	240	216	192	168	144	120	96	72	48	24

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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
721	721	697	673	649	625	601	577	553	529	505	481	457	433	409	385	361	336	312	288	264	240	216	192	168	144	120	96	72	48	24
722	722	698	674	650	626	602	578	553	529	505	481	457	433	409	385	361	337	313	289	265	241	217	192	168	144	120	96	72	48	24
723	723	699	675	651	627	602	578	554	530	506	482	458	434	410	386	362	337	313	289	265	241	217	193	169	145	120	96	72	48	24
724	724	700	676	652	627	603	579	555	531	507	483	459	434	410	386	362	338	314	290	265	241	217	193	169	145	121	97	72	48	24
725	725	701	677	653	628	604	580	556	532	508	483	459	435	411	387	363	338	314	290	266	242	218	193	169	145	121	97	73	48	24
726	726	702	678	653	629	605	581	557	532	508	484	460	436	411	387	363	339	315	290	266	242	218	194	169	145	121	97	73	48	24
727	727	703	679	654	630	606	582	557	533	509	485	460	436	412	388	364	339	315	291	267	242	218	194	170	145	121	97	73	48	24
728	728	704	679	655	631	607	582	558	534	510	485	461	437	412	388	364	340	315	291	267	243	218	194	170	145	121	97	73	48	24
729	729	705	680	656	632	607	583	559	535	510	486	462	437	413	389	365	340	316	292	267	243	219	194	170	146	121	97	73	49	24
730	730	706	681	657	633	608	584	560	535	511	487	462	438	414	389	365	341	316	292	268	243	219	195	170	146	122	97	73	45	24
731	731	707	682	658	633	609	585	560	536	512	487	463	439	414	390	366	341	317	292	268	244	219	195	171	146	122	97	73	49	24
732	732	708	683	659	634	610	586	561	537	512	488	464	439	415	390	366	342	317	293	268	244	220	195	171	146	122	98	73	49	24
733	733	709	684	660	635	611	586	562	538	513	489	464	440	415	391	367	342	318	293	269	244	220	195	171	147	122	98	73	49	24
734	734	709	685	661	636	612	587	563	538	514	489	465	440	416	391	367	342	318	294	269	245	220	196	171	147	122	98	73	49	24
735	735	710	686	662	637	612	588	563	539	515	490	465	441	416	392	368	343	318	294	269	245	221	196	171	147	122	98	74	49	24
736	736	711	687	662	638	613	589	564	540	515	491	466	442	417	393	368	343	319	294	270	245	221	196	172	147	123	98	74	49	25
737	737	712	688	663	639	614	590	565	540	516	491	467	442	418	393	369	344	319	295	270	246	221	196	172	147	123	98	74	49	25
738	738	713	689	664	640	615	590	566	541	517	492	467	443	418	394	369	344	320	295	271	246	221	197	172	148	123	98	74	49	25
739	739	714	690	665	640	616	591	567	542	517	493	468	443	419	394	370	345	320	296	271	248	222	197	172	148	123	99	74	49	25
740	740	715	691	666	641	617	592	567	543	518	493	469	444	419	395	370	345	321	296	271	247	222	197	173	148	123	99	74	49	25
741	741	716	692	667	642	617	593	568	543	519	494	469	445	420	395	371	346	321	296	272	247	222	198	173	148	123	99	74	49	25
742	742	717	693	668	643	618	594	569	544	519	495	470	445	420	396	371	346	322	297	272	247	223	198	173	148	124	99	74	49	25
743	743	718	693	669	644	619	594	570	545	520	495	471	446	421	396	372	347	322	297	272	248	223	198	173	149	124	99	74	49	25
744	744	719	694	670	645	620	595	570	546	521	496	471	446	422	397	372	347	322	298	273	248	223	198	174	149	124	99	74	50	25
745	745	720	695	671	646	621	596	571	546	522	497	472	447	422	397	373	348	323	298	273	248	224	199	174	149	124	99	75	50	25
746	746	721	696	671	646	622	597	572	547	522	497	472	448	423	398	373	348	323	298	273	249	224	199	174	149	124	99	75	50	25
747	747	722	697	672	647	622	598	573	548	523	498	473	448	423	398	374	349	324	299	274	249	224	199	174	149	124	100	75	50	25
748	748	723	698	673	648	623	598	573	549	524	499	474	449	424	399	374	349	324	299	274	249	224	199	175	150	125	100	75	50	25
749	749	724	699	674	649	624	599	574	549	524	499	474	449	424	399	375	349	325	300	275	250	225	200	175	150	125	100	75	50	25
750	750	725	700	675	650	625	600	575	550	525	500	475	450	425	400	375	350	325	300	275	250	225	200	175	150	125	100	75	50	25
751	751	726	701	676	651	626	601	576	551	526	501	476	451	426	401	376	350	325	300	275	250	225	200	175	150	125	100	75	50	25
752	752	727	702	677	652	627	602	576	551	526	501	476	451	426	401	376	351	326	301	276	251	226	200	175	150	125	100	75	50	25
753	753	728	703	678	653	627	602	577	552	527	502	477	452	427	402	377	351	326	301	276	251	226	201	176	151	125	100	75	50	25
754	754	729	704	679	653	628	603	578	553	528	503	478	452	427	402	377	352	327	302	276	251	226	201	176	151	125	101	75	50	25
755	755	730	705	680	654	629	604	579	554	529	503	478	453	428	403	378	352	327	302	277	252	227	201	176	151	126	101	76	50	25
756	756	731	706	680	655	630	605	580	554	529	504	479	454	428	403	378	353	328	302	277	252	227	202	176	151	126	101	76	50	25
757	757	732	707	681	656	631	606	580	555	530	505	479	454	429	404	379	353	328	303	278	252	227	202	177	151	126	101	76	50	25
758	758	733	707	682	657	632	606	581	556	531	505	480	455	429	404	379	354	328	303	278	253	227	202	177	152	126	101	76	50	25
759	759	734	708	683	658	632	607	582	557	531	506	481	455	430	405	380	354	329	304	278	253	228	202	177	152	126	101	76	51	25
760	760	735	709	684	659	633	608	583	557	532	507	481	456	431	405	380	355	329	304	279	253	228	203	177	152	127	101	76	51	25

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FOOD STAMP ALLOTMENT PRORATION TABLE

MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
761	761	736	710	685	659	634	609	583	558	533	507	482	457	431	406	381	355	330	304	279	254	228	203	178	152	127	101	76	51	25
762	762	737	711	686	660	635	610	584	559	533	508	483	457	432	406	381	356	330	305	279	254	229	203	178	152	127	102	76	51	25
763	763	738	712	687	661	636	610	585	560	534	509	483	458	432	407	382	356	331	305	280	254	229	203	178	153	127	102	76	51	25
764	764	739	713	688	662	637	611	586	560	535	509	484	458	433	407	382	356	331	306	280	255	229	204	178	153	127	102	76	51	25
765	765	739	714	689	663	637	612	586	561	536	510	484	459	433	408	383	357	331	306	280	255	230	204	178	153	127	102	77	51	25
766	766	740	715	689	664	638	613	587	562	536	511	485	460	434	409	383	357	332	306	281	255	230	204	179	153	128	102	77	51	26
767	767	741	716	690	665	639	614	588	562	537	511	485	460	435	409	384	358	332	307	281	256	230	204	179	153	128	102	77	51	26
768	768	742	717	691	666	640	614	589	563	538	512	486	461	435	410	384	358	333	307	282	256	230	205	179	154	128	102	77	51	26
769	769	743	718	692	666	641	615	590	564	538	513	487	461	436	410	385	359	333	308	282	256	231	205	179	154	128	103	77	51	26
770	770	744	719	693	667	642	616	590	565	539	513	488	462	436	411	385	359	334	308	282	257	231	205	180	154	128	103	77	51	26
771	771	745	720	694	668	642	617	591	565	540	514	488	463	437	411	386	360	334	308	283	257	231	206	180	154	128	103	77	51	26
772	772	746	721	695	669	643	618	592	566	540	515	489	463	437	412	386	360	335	309	283	257	232	206	180	154	129	103	77	51	26
773	773	747	721	696	670	644	618	593	567	541	515	490	464	438	412	387	361	335	309	283	258	232	206	180	155	129	103	77	51	26
774	774	748	722	697	671	645	619	593	568	542	516	490	464	439	413	387	361	335	310	284	258	232	206	181	155	129	103	77	52	26
775	775	749	723	698	672	646	620	594	568	543	517	491	465	439	413	388	362	336	310	284	258	233	207	181	155	129	103	78	52	26
776	776	750	724	699	672	647	621	595	569	543	517	491	466	440	414	388	362	336	310	284	259	233	207	181	155	129	103	78	52	26
777	777	751	725	699	673	647	622	596	570	544	518	492	466	440	414	389	363	337	311	285	259	233	207	181	155	129	104	78	52	26
778	778	752	726	700	674	648	622	596	571	545	519	493	467	441	415	389	363	337	311	285	259	233	207	182	156	130	104	78	52	26
779	779	753	727	701	675	649	623	597	571	545	519	493	467	441	415	390	363	338	312	286	260	234	208	182	156	130	104	78	52	26
780	780	754	728	702	676	650	624	598	572	546	520	494	468	442	416	390	364	338	312	286	260	234	208	182	156	130	104	78	52	26
781	781	755	729	703	677	651	625	599	573	547	521	495	469	443	417	391	364	338	312	286	260	234	208	182	156	130	104	78	52	26
782	782	756	730	704	678	652	626	599	573	547	521	495	469	443	417	391	365	339	313	287	261	235	208	182	156	130	104	78	52	26
783	783	757	731	705	679	652	626	600	574	548	522	496	470	444	418	392	365	339	313	287	261	235	209	183	157	130	104	78	52	26
784	784	758	732	706	679	653	627	601	575	549	523	497	470	444	418	392	366	340	314	287	261	235	209	183	157	131	105	78	52	26
785	785	759	733	707	680	654	628	602	576	550	523	497	471	445	419	393	366	340	314	288	262	236	209	183	157	131	105	79	52	26
786	786	760	734	707	681	655	629	603	576	550	524	498	472	445	419	393	367	341	314	288	262	236	210	183	157	131	105	79	52	26
787	787	761	735	708	682	656	630	603	577	551	525	498	472	446	420	394	367	341	315	289	262	236	210	184	157	131	105	79	52	26
788	788	762	735	709	683	657	630	604	578	552	525	499	473	446	420	394	368	341	315	289	263	236	210	184	158	131	105	79	52	26
789	789	763	736	710	684	657	631	605	579	552	526	500	473	447	421	395	368	342	316	289	263	237	210	184	158	131	105	79	53	26
790	790	764	737	711	685	658	632	606	579	553	527	500	474	448	421	395	369	342	316	290	263	237	211	184	158	132	105	79	53	26
791	791	765	738	712	685	659	633	606	580	554	527	501	475	449	422	396	369	343	316	290	264	237	211	185	158	132	105	79	53	26
792	792	766	739	713	686	660	634	607	581	554	528	502	475	449	422	396	370	343	317	290	264	238	211	185	159	132	106	79	53	26
793	793	767	740	714	687	661	634	608	582	555	529	502	476	449	423	397	370	344	317	291	264	238	211	185	159	132	106	79	53	26
794	794	767	741	715	688	662	635	609	582	556	529	503	476	450	423	397	370	344	318	291	265	238	212	185	159	132	106	79	53	26
795	795	768	742	716	689	662	636	609	583	557	530	503	477	450	424	398	371	344	318	291	265	239	212	185	159	132	106	80	53	26
796	796	769	743	716	690	663	637	610	584	557	531	504	478	451	425	398	371	345	318	292	265	239	212	186	159	133	106	80	53	27
797	797	770	744	717	691	664	638	611	584	558	531	505	478	452	425	399	372	345	319	292	266	239	212	186	159	133	106	80	53	27
798	798	771	745	718	692	665	638	612	585	559	532	505	479	452	426	399	372	346	319	293	266	239	213	186	160	133	106	80	53	27
799	799	772	746	719	692	666	639	613	586	559	533	506	479	453	426	400	373	346	320	293	266	240	213	186	160	133	107	80	53	27
800	800	773	747	720	693	667	640	613	587	560	533	507	480	453	427	400	373	347	320	293	267	240	213	187	160	133	107	80	53	27

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(12/81)		(21 of 23)		364.990																											
MONTHLY	ALLOTMENT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
001	:	801	774	748	721	694	667	641	614	587	561	534	507	481	454	427	401	374	347	320	294	267	240	214	187	160	133	107	80	53	27
002	:	802	775	749	722	695	668	642	615	588	561	535	508	481	454	428	401	374	348	321	294	267	241	214	187	160	134	107	80	53	27
003	:	803	776	749	723	696	669	642	616	589	562	535	509	482	455	428	402	375	348	321	294	268	241	214	187	161	134	107	80	53	27
004	:	804	777	750	724	697	670	643	616	590	563	536	509	482	456	429	402	375	348	322	295	268	241	214	188	161	134	107	80	54	27
005	:	805	778	751	725	698	671	644	617	590	564	537	510	483	456	429	403	376	349	322	295	268	242	215	188	161	134	107	81	54	27
006	:	806	779	752	725	698	672	645	618	591	564	537	510	484	457	430	403	376	349	322	295	269	242	215	188	161	134	107	81	54	27
007	:	807	780	753	726	699	672	646	619	592	565	538	511	484	457	430	404	377	350	323	296	269	242	215	188	161	134	108	81	54	27
008	:	808	781	754	727	700	673	646	619	593	566	539	512	485	458	431	404	377	350	323	296	269	242	215	189	162	135	108	81	54	27
009	:	809	782	755	728	701	674	647	620	593	566	539	512	485	458	431	405	377	351	324	297	270	243	216	189	162	135	108	81	54	27
010	:	810	783	756	729	702	675	648	621	594	567	540	513	486	459	432	405	378	351	324	297	270	243	216	189	162	135	108	81	54	27
011	:	811	784	757	730	703	676	649	622	595	568	541	514	487	460	433	406	378	351	324	297	270	243	216	189	162	135	108	81	54	27
012	:	812	785	758	731	704	677	650	622	595	568	541	514	487	460	433	406	379	352	325	298	271	244	216	189	162	135	108	81	54	27
013	:	813	786	759	732	705	677	650	623	596	569	542	515	488	461	434	407	379	352	325	298	271	244	217	190	163	135	108	81	54	27
014	:	814	787	760	733	705	678	651	624	597	570	543	516	488	461	434	407	380	353	326	298	271	244	217	190	163	135	109	81	54	27
015	:	815	788	761	734	706	679	652	625	598	571	543	516	489	462	435	408	380	353	326	299	272	245	217	190	163	136	109	82	54	27
016	:	816	789	762	734	707	680	653	626	598	571	544	517	490	462	435	408	381	354	326	299	272	245	218	190	163	136	109	82	54	27
017	:	817	790	763	735	708	681	654	626	599	572	545	517	490	463	436	409	381	354	327	300	272	245	218	191	163	136	109	82	54	27
018	:	818	791	763	736	709	682	654	627	600	573	545	518	491	463	436	409	382	354	327	300	273	245	218	191	164	136	109	82	54	27
019	:	819	792	764	737	710	682	655	628	601	573	546	519	491	464	437	410	382	355	328	300	273	246	218	191	164	136	109	82	55	27
020	:	820	793	765	738	711	683	656	629	601	574	547	519	492	465	437	410	383	355	328	301	273	246	219	191	164	137	109	82	55	27
021	:	821	794	766	739	711	684	657	629	602	575	547	520	493	465	438	411	383	356	328	301	274	246	219	192	164	137	109	82	55	27
022	:	822	795	767	740	712	685	658	630	603	575	548	521	493	466	438	411	384	356	329	301	274	247	219	192	164	137	110	82	55	27
023	:	823	796	768	741	713	686	658	631	604	576	549	521	494	466	439	412	384	357	329	302	274	247	219	192	165	137	110	82	55	27
024	:	824	796	769	742	714	687	659	632	604	577	549	522	494	467	439	412	384	357	330	302	275	247	219	192	165	137	110	82	55	27
025	:	825	797	770	743	715	687	660	632	605	578	550	522	495	467	440	413	385	357	330	302	275	248	220	192	165	137	110	83	55	27
026	:	826	798	771	743	716	688	661	633	606	578	551	523	496	468	441	413	385	358	330	303	275	248	220	193	165	138	110	83	55	27
027	:	827	799	772	744	717	689	662	634	606	579	551	524	496	469	441	414	386	358	331	303	276	248	220	193	165	138	110	83	55	27
028	:	828	800	773	745	718	690	662	635	607	580	552	524	497	469	442	414	386	359	331	304	276	248	221	193	166	138	110	83	55	27
029	:	829	801	774	746	718	691	663	636	608	580	553	525	497	470	442	415	387	359	332	304	276	249	221	193	166	138	111	83	55	27
030	:	830	802	775	747	719	692	664	636	609	581	553	526	498	470	443	415	387	360	332	304	277	249	221	194	166	139	111	83	55	27
031	:	831	803	776	748	720	692	665	637	609	582	554	526	499	471	443	416	388	360	332	305	277	249	222	194	166	139	111	83	55	27
032	:	832	804	777	749	721	693	666	638	610	582	555	527	499	471	444	416	388	361	333	305	277	250	222	194	166	139	111	83	55	27
033	:	833	805	777	750	722	694	666	639	611	583	555	528	500	472	444	417	389	361	333	305	278	250	222	194	167	139	111	83	55	27
034	:	834	806	778	751	723	695	667	639	612	584	556	528	500	473	445	417	389	361	334	306	278	250	222	195	167	139	111	83	56	27
035	:	835	807	779	752	724	696	668	640	612	585	557	529	501	473	445	418	390	362	334	306	278	251	223	195	167	139	111	84	56	27
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037	:	837	809	781	753	725	697	670	642	614	586	558	530	502	474	446	419	391	363	335	307	279	251	223	195	167	139	112	84	56	27
038	:	838	810	782	754	726	698	670	642	615	587	559	531	503	475	447	419	391	363	335	307	279	251	223	196	168	140	112	84	56	

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MONTHLY ALLOTMENT	DATE OF APPLICATION																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30/31
841	841	813	785	757	729	701	673	645	617	589	561	533	505	477	449	421	392	364	336	308	280	252	224	196	168	140	112	84	56	28
842	842	814	786	758	730	702	674	645	617	589	561	533	505	477	449	421	393	365	337	309	281	253	224	196	168	140	112	84	56	28
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844	844	816	788	760	731	703	675	647	619	591	563	535	506	478	450	422	394	366	338	309	281	253	225	197	169	141	113	84	56	28
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847	847	819	791	762	734	706	678	649	621	593	565	536	508	480	452	424	395	367	339	311	282	254	226	198	169	141	113	85	56	28
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855	855	826	798	770	741	712	684	655	627	599	570	541	513	484	456	428	399	370	342	313	285	257	228	199	171	142	114	86	57	28
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866	866	837	808	779	750	722	693	664	635	606	577	548	520	491	462	433	404	375	346	317	289	260	231	202	173	144	116	87	58	29
867	867	838	809	780	751	722	694	665	636	607	578	549	520	491	462	434	405	376	347	318	289	260	231	202	173	144	116	87	58	29
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872	872	843	814	785	756	727	698	668	639	610	581	552	523	494	465	436	407	378	349	320	291	262	232	203	174	145	116	87	58	29
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875	875	846	817	788	758	729	700	671	642	613	583	554	525	496	467	438	408	379	350	321	292	263	233	204	175	146	117	88	58	29
876	876	847	818	788	759	730	701	672	642	613	584	555	526	496	467	438	409	380	350	321	292	263	234	204	175	146	117	88	58	29
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881	881	852	822	793	763	734	705	675	646	617	587	558	529	499	470	441	411	382	352	323	294	264	235	206	176	147	117	88	59	29
882	882	853	823	794	764	735	706	676	647	617	588	559	529	500	470	441	412	382	353	323	294	265	235	206	176	147	118	88	59	29
883	883	854	824	795	765	736	706	677	648	618	589	559	530	500	471	442	412	383	353	324	294	265	235	206	177	147	118	88	59	29
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885	885	855	826	797	767	737	708	678	649	620	590	560	531	501	472	443	413	383	354	324	295	266	236	206	177	147	118	89	59	29
886	886	856	827	797	768	738	709	679	650	620	591	561	532	502	473	443	413	384	354	325	295	266	236	207	177	148	118	89	59	30
887	887	857	828	798	769	739	710	680	650	621	591	562	532	503	473	444	414	384	355	325	296	266	236	207	177	148	118	89	59	30
888	888	858	829	799	770	740	710	681	651	622	592	562	533	503	474	444	414	385	355	326	296	266	237	207	178	148	118	89	59	30
889	889	859	830	800	770	741	711	682	652	622	593	563	533	504	474	445	415	385	356	326	296	267	237	207	178	148	119	89	59	30
890	890	860	831	801	771	742	712	682	653	623	593	564	534	504	475	445	415	386	356	326	297	267	237	208	178	148	119	89	59	30
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893	893	863	833	804	774	744	714	685	655	625	595	565	536	506	476	447	417	387	357	327	298	268	238	208	179	149	119	89	59	30
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895	895	865	835	806	776	746	716	686	656	627	597	567	537	507	477	448	418	388	358	328	298	269	239	209	179	149	119	90	60	30
896	896	866	836	806	776	747	717	687	657	627	597	567	538	508	478	448	418	388	358	328	299	269	239	209	179	149	119	90	60	30
897	897	867	837	807	777	747	718	688	658	628	598	568	538	508	478	449	419	389	359	329	299	269	239	209	179	149	120	90	60	30
898	898	868	838	808	778	748	718	688	659	629	599	569	539	509	479	449	419	389	359	329	299	269	239	210	180	150	120	90	60	30
899	899	869	839	809	779	749	719	689	659	629	599	569	539	509	479	450	419	390	360	330	300	270	240	210	180	150	120	90	60	30
900	900	870	840	810	780	750	720	690	660	630	600	570	540	510	480	450	420	390	360	330	300	270	240	210	180	150	120	90	60	30

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FOOD STAMP PROGRAM
SPECIAL SITUATION HOUSEHOLDS

Rev. 10/81

365.030: Introduction

This chapter contains the food stamp policy and certification procedures for special situation households. Special certification procedures are prescribed when a household's receipt of income or other circumstances are substantially different from the typical food stamp household. These procedural deviations are intended to minimize any undue advantage or disadvantage to a household as a result of their unusual circumstances. Some examples of these procedural deviations are as follows:

- (A) Averaging the income for certain self-employed individuals and seasonal employees instead of considering only that part of their income expected to be received during the certification period. Likewise, certain student income is averaged over the period it is intended to cover.
- (B) Allowing self-employed and student households deductions for certain expenses paid prior to the certification period in addition to those expenses paid during the certification period.
- (C) Requiring residents of drug or alcoholic treatment and rehabilitation centers to apply for and use food stamps through an authorized representative.
- (D) Requiring destitute and zero net income households to provide verification of residence and identity and the name of an acceptable collateral contact, but also allowing for immediate certification and issuance for these households.
- (E) Certifying households even if they include ineligible individuals, whether the ineligible individual is a non-household member or a disqualified household member. The worker must evaluate the income and resources available to these households differently depending on whether the ineligible individual is a non-household member or a disqualified household member.

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program. No individual shall be required to make an application for SSI benefits as a condition of food stamp eligibility.

(A) Definitions

- (1) "SSI" means Supplemental Security Income payments made under Title XVI of the Social Security Act, as amended, including the State contribution to those payments.
- (2) "SSI Recipient" means an individual or an individual and eligible spouse who receive SSI.
- (3) "Essential Person" means an individual who lives in the home of the SSI recipient, and whose needs were considered in determining the grant of the SSI recipient in December 1973, under the Old Age Assistance or Disability Assistance Program in effect at that time. The essential person must not be eligible for SSI in his or her own right.

365.083: Determining Eligibility and Benefit Level for Household Containing SSI Recipient

SSI recipients are considered non-household members. The income and resources of the SSI recipient living in an eligible household shall not be considered in determining the household's eligibility and benefit level in accordance with Section 510.

(A) Determining Income. There are situations where the SSI recipient receives payments which are specifically meant for meeting the needs of eligible household members. Such payments might include, but are not limited to, AFDC grants for dependent children, foster care payments, and support payments. When the SSI recipient is functioning solely in a caretaker or disbursement capacity, the payment must be considered income to the household members it is intended to benefit. If the ineligible SSI recipient's portion cannot be differentiated, the payment shall be evenly prorated among the intended beneficiaries and the SSI recipient's share excluded in accordance with Section 510.

(B) Determining Expenses. When deductible expenses are met from funds for which the SSI recipient acts strictly in a disbursement capacity, the household is entitled to such deduction. If the household shares deductible expenses with an ineligible SSI recipient, only the amount actually paid or contributed by the household is deducted as a household expense. If the payments or contributions cannot be differentiated, the expenses shall be prorated evenly among persons actually paying or contributing to the expense and only the household's prorata share deducted.

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365.085: Assigning Certification Periods to Households Containing an SSI Recipient

The eligible household shall be assigned a certification period in accordance with 106 CMR 364.700 through 730. The presence of an ineligible SSI recipient shall not affect the length of the certification period assigned to the remaining household members.

365.087: Eligibility of Persons Essential to Care

An individual included in another individual's SSI grant as a person "essential to care" is not considered an SSI recipient for food stamp purposes. In determining the income of the essential person, that portion of the SSI recipient's payment in excess of the entitlement according to SSI standards will be counted as income.

365.100: PA Households

Public Assistance (PA) households are not categorically eligible for the Food Stamp Program.

365.110: Definition of a PA Household

(A) PA households are those households in which all members receive a cash grant under one of the following programs: Aid to Families with Dependent Children (AFDC), General Relief (GR), the Cuban Refugee Program (CRP) or the Vietnamese and Cambodian Refugee Program (VCRP). If some members of a household but not all receive cash assistance under one of these programs, the household is called a "mixed household" and is treated as a Non-Public Assistance (NPA) household.

365.120: Determining Eligibility and Benefit Level

(A) To facilitate their participation in the program, PA households shall be allowed to apply for food stamp benefits at the same time they apply for other assistance. However, the household's eligibility and benefit level shall be based on food stamp eligibility criteria and the household shall be certified in accordance with notice, timeliness and procedural requirements of the food stamp regulations. If the household's intention to apply for food stamps is unclear, the worker shall determine at the interview, or in other contact with the household, whether or not the household wants the PA application processed for food stamp purposes.

(1) Joint Application Form. The AFDC application and the GR application together with the GR food Stamp affidavit (FSP) shall contain all the information necessary to determine a household's

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food stamp eligibility and benefit level. These joint applications shall also have a place for the household to indicate if it does not wish to apply for food stamps. The applicant shall not be required to fill out any additional application form for food stamp purposes.

(2) Single Interview Requirement. The worker shall conduct a single interview at initial application for both cash assistance and food stamp purposes. PA households shall not be required to see a different worker or otherwise be subjected to two interview requirements in order to obtain the benefits of both programs. Following the single interview, the application may be processed by separate workers to determine eligibility and benefit levels for food stamps and cash assistance. A household's eligibility for food stamps out-of-office interview provisions does not relieve the household of any responsibility for a fact-to-face interview in order to be certified for public assistance.

(3) Verification Standard. For households applying for both cash assistance and food stamps, the verification procedures described in 106 CRM 361.600 through 361.660 shall be followed for those factors of eligibility which are needed solely for purposes of determining the household's eligibility for food stamps. For those factors of eligibility which are needed to determine eligibility for both the cash assistance program and food stamps the worker shall follow cash assistance program verification requirements. However, in no case shall the worker delay the household's food stamp benefits if, at the end of 30 days following the date the application was filed, the applicant has provided sufficient verification to meet the verification for food stamp purposes, even if there is not sufficient verification to meet the cash assistance verification rules.

For example, a family applies for AFDC and food stamps. The applicant submits verification of income and all other verification necessary for food stamp purposes shortly after submitting the joint application. However, the applicant does not submit birth certificates which are necessary to establish AFDC eligibility. In this case, the food stamp assistance shall not be delayed or denied because of the household's failure to comply with a PA eligibility requirement.

On the other hand, if this same family failed to submit income verification by the 30th day following the date of application, food stamp assistance would be denied on the 30th day because income verification is required for both the Food Stamp and AFDC Programs. The household would have to re-apply if it wants to participate in either or both programs.

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(4) Timeliness Standard. The worker must make the food stamp eligibility determination in accordance with all the timeliness standards and procedures specified in 106 CMR 361.700 through 960.

a. As a result of differences in PA and food stamp application processing procedures and timeliness standard, the worker may have to determine food stamp eligibility prior to determining eligibility for PA payments. Action on the food stamp portion of the application shall not be delayed nor the application denied on grounds that the PA determination has not been made.

b. Households whose PA applications are denied shall not be required to file a new food stamp application but shall have their food stamp eligibility determined or continued on the basis of the original application filed jointly for PA and food stamp purposes and any other documented information obtained subsequent to the application which may have been used in the PA determination and which is relevant to food stamp eligibility or level of benefits.

(B) Resource Standards for PA Households. PA households are subject to all Food Stamp Program resource eligibility standards.

(C) Income Standards For PA Households.

(1) Countable Income - All income received by the PA household, including the cash grant, special allowances and all other income will be counted when determining the household's net monthly food stamp income unless it is excluded from income in accordance with 106 CMR 363.

(2) Income Exclusions and Deductions. - PA households will receive only the income exclusions and deductions provided in Food Stamp policy. The income exclusions and deductions allowed under cash grant programs for the purposes of grant computation shall not be allowed in determining income for food stamp purposes.

(3) Special Allowances, Retroactive Lump Sum Payments and Protective Payments.

a. Special Allowances - Special allowances, except for one time payments (i.e., moving expenses for AFDC families) or vendor payments, are treated as countable income. This income may be averaged over the certification period or the household may be assigned short certification periods or a variable basis of issuance to cover the period when the allowance is received.

b. Retroactive Lump Sum PA Payments - Retroactive lump sum payments are excluded as income and counted as a resource in the month received.. If a PA recipient's first payment is delayed beyond the first month of eligibility, the retroactive portion of that check is considered a lump sum payment. For example, a

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Public Assistance (PA) households are not categorically eligible for the Food Stamp Program.

365.110: Definition of a PA Household

PA households are those households in which all members receive a cash grant under one of the following programs: Aid to Families with Dependent Children (AFDC), General Relief (GR), the Refugee Resettlement Program (RRP). If some members of a household but not all receive cash assistance under one of these programs, the household is called a "mixed household" and is treated as a Non-Public Assistance (NPA) household.

365.120: Determining Eligibility and Benefit Level

(A) To facilitate their participation in the program, PA households shall be allowed to apply for food stamp benefits at the same time they apply for other assistance. However, the household's eligibility and benefit level shall be based on food stamp eligibility criteria and the household shall be certified in accordance with notice, timeliness and procedural requirements of the food stamp regulations. If the household's intention to apply for food stamps is unclear, the worker shall determine at the interview, or in other contact with the household, whether or not the household wants the PA application processed for food stamp purposes.

(1) Joint Application Form. The AFDC application and the GR application together with the GR food stamp affidavit shall contain all the information necessary to determine a household's

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food stamp eligibility and benefit level. These joint applications shall also have a place for the household to indicate if it does not wish to apply for food stamps. The applicant shall not be required to fill out any additional application form for food stamp purposes.

(2) Single Interview Requirement. The worker shall conduct a single interview at initial application for both cash assistance and food stamp purposes. PA households shall not be required to see a different worker or otherwise be subjected to two interview requirements in order to obtain the benefits of both programs. Following the single interview, the application may be processed by separate workers to determine eligibility and benefit levels for food stamps and cash assistance. A household's eligibility for food stamps out-of-office interview provisions does not relieve the household of any responsibility for a face-to-face interview in order to be certified for public assistance.

(3) Verification Standard. For households applying for both cash assistance and food stamps, the verification procedures described in 106 CMR 361.600 through 361.660 shall be followed for those factors of eligibility which are needed solely for purposes of determining the household's eligibility for food stamps. For those factors of eligibility which are needed to determine eligibility for both the cash assistance program and food stamps the worker shall follow cash assistance program verification requirements. However, in no case shall the worker delay the household's food stamp benefits if, at the end of 30 days following the date the application was filed, the applicant has provided sufficient verification to meet the verification for food stamp purposes, even if there is not sufficient verification to meet the cash assistance verification rules.

For example, a family applies for AFDC and food stamps. The applicant submits verification of income and all other verification necessary for food stamp purposes shortly after submitting the joint application. However, the applicant does not submit birth certificates which are necessary to establish AFDC eligibility. In this case, the food stamp assistance shall not be delayed or denied because of the household's failure to comply with a PA eligibility requirement.

On the other hand, if this same family failed to submit income verification by the 30th day following the date of application, food stamp assistance would be denied on the 30th day because income verification is required for both the Food Stamp and AFDC Programs. The household would have to re-apply if it wants to participate in either or both programs.

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(4) **Timeliness Standard.** The worker must make the food stamp eligibility determination in accordance with all the timeliness standards and procedures specified in 106 CMR 361.700 through 361.960.

a. As a result of differences in PA and food stamp application processing procedures and timeliness standard, the worker may have to determine food stamp eligibility prior to determining eligibility for PA payments. Action on the food stamp portion of the application shall not be delayed nor the application denied on grounds that the PA determination has not been made.

b. Households whose PA applications are denied shall not be required to file a new food stamp application but shall have their food stamp eligibility determined or continued on the basis of the original application filed jointly for PA and food stamp purposes and any other documented information obtained subsequent to the application which may have been used in the PA determination and which is relevant to food stamp eligibility or level of benefits.

(B) **Resource Standards for PA Households.** PA households are subject to all Food Stamp Program resource eligibility standards.

(C) **Income Standards For PA Households.**

(1) **Countable Income.** All income received by the PA household, including the cash grant, special allowances and all other income (unless excluded in accordance with 106 CMR 363.230) shall be counted in determining the household's eligibility for food stamps.

(2) **Income Exclusions and Deductions.** PA households will receive only the income exclusions and deductions provided in Food Stamp policy. The income exclusions and deductions allowed under cash grant programs for the purposes of grant computation shall not be allowed in determining income for food stamp purposes.

(3) **Special Allowances, Retroactive Lump Sum Payments and Protective Payments.**

a. **Special Allowances.** Special allowances, except for one time payments (i.e., moving expenses for AFDC families) or vendor payments, are treated as countable income. This income may be averaged over the certification period or the household may be assigned short certification periods or a variable basis of issuance to cover the period when the allowance is received.

b. **Retroactive Lump Sum PA Payments.** Retroactive lump sum payments are excluded as income and counted as a resource in the month received. If a PA recipient's first payment is delayed beyond the first month of eligibility, the retroactive portion of that check is considered a lump sum payment. For example, a

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household applies in November and is eligible in November but receives its first check in December to cover both months. Only the December benefit amount is considered as income.

- c. Protective Payments - Any portion of the cash grant which is legally obligated and otherwise payable to the PA household, but diverted by the Department to a third party for a household expense (i.e., vendor rent) is considered countable income when determining food stamp eligibility and benefit level.

365.130: Work Registration for PA Households

Cash assistance recipients are subject to Food Stamp Program work registration requirements unless they are exempt from registration in accordance with Section 362.330. PA households shall not be denied food stamp benefits or have their benefits terminated solely because a member refuses to comply with the AFDC Program or GR Program work requirements. If that member does not meet or no longer meets any of the Food Stamp Program exemptions from work registration, that member must register for work as a condition of food stamp eligibility.

365.140: Certification Periods for PA Households

All PA households shall be assigned certification periods that expire the month following the household's next scheduled PA redetermination, provided the food stamp certification period does not exceed one year.

365.150: Recertification Requirements for PA Households

PA households shall be recertified for food stamps, to the extent possible, at the same time they are redetermined for the cash assistance program. If a PA household has not had its PA redetermination by the end of the eleventh month following its initial certification or last redetermination, a Notice of Food Stamp Termination shall be sent to the household.

365.160: Change Reporting Requirements for PA Households

PA households have the same reporting requirements as any other food stamp household, and shall use the Food Stamp Change Report Form. PA households which report a change in circumstances to the PA worker shall be considered to have reported the change for food stamp purposes.

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Exception: PA households are not required to report changes in the cash assistance grant. Since the worker has prior knowledge of all changes in the cash assistance grant, action shall be taken based on the worker's information.

365.170: Department Action on Reported Changes

Households shall be notified whenever their food stamp benefits are changed as a result of changes in the cash assistance benefits or whenever the food stamp certification period is shortened to reflect changes in the household's circumstances.

(A) Department Action When Certification Period is Shortened. If the certification period is to be shortened, the household's certification period shall not end any earlier than the month following the month in which the worker determines that the certification period shall be shortened. This allows adequate time for the worker to send a Notice of Food Stamp Termination and for the household to timely reapply. If the cash assistance benefits are terminated and the household is still eligible for food stamp benefits, members of the household must be advised of the food stamp work registration requirements, if applicable. For example, when AFDC is terminated, the WIN registration exemption no longer applies.

(B) Department Action When Cash Assistance is Reduced.

- (1) When the change in circumstances requires a reduction of the household's cash assistance and a reduction or termination of food stamp assistance, the PA worker shall issue a NFL #10 to notify the household of the proposed action. If the household requests a fair hearing within the period provided by the Notice of Adverse Action, the household's food stamp benefits shall be continued on the basis authorized immediately prior to sending the notice. If a fair hearing is requested for both program benefits, the hearing shall be conducted according to PA procedures and timeliness standards. If the household does not appeal, the change shall be made effective in the month following the expiration of the advance notice period.
- (2) When the change in circumstances requires a reduction of cash assistance, but results in an increase in the food stamp monthly allotment, the worker shall issue the NFL #10 for the cash assistance change, but shall not take any action to increase the household's food stamp benefits until the household decides whether it will appeal the proposed action to reduce the cash assistance. If the household decides to appeal and its cash assistance benefits are continued, the household's food stamp benefits shall continue at the previous basis. If the household does not appeal, the worker shall make the food stamp change effective in accordance with 106 CMR 366.120 except that the time limits for the worker to act on changes

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which increase a household's benefits shall be calculated from the date the PA notice of adverse action period expires.

(C) Department Action When Cash Assistance is Terminated. When the household's change in circumstances requires a termination of cash assistance, the PA worker shall issue a NFL #1 (or #11) to notify the household of the action to terminate cash assistance. The PA worker shall give the food stamp case record information to the NPA unit. The NPA food stamp unit shall take the following actions.

(1) If there is sufficient information to determine continuing food stamp eligibility, the NPA worker shall make the determination and send appropriate notification letters to the household.

(2) If there is not sufficient information to determine continuing food stamp eligibility, the NPA worker shall insure that the household's food stamp benefits continue, uninterrupted, at the PA authorized benefit level, and send the household a Notice of Expiration which informs the household that its certification period will expire at the end of the month following the month the notice of expiration is sent and that the household must reapply if it wishes to continue to participate. The Notice of Expiration shall also explain to the household that its certification period is expiring because of changes in its circumstances which may affect its food stamp eligibility and benefit level. Households which do not comply with the Notice of Recertification will be terminated with no further notice to the household.

365.180: Mass Changes in Public Assistance

When the Department makes an overall adjustment to PA payments, corresponding adjustments in a household's food stamp benefits shall be handled as a mass change. When the Department has at least 30 days advance knowledge of the amount of the PA adjustment, the Department shall recompute food stamp benefits to be effective in the same month as the PA change. If the Department does not have sufficient notice, the food stamp change shall be effective not later than the month following the month in which the PA change was made.

A Notice of Adverse Action is not required when a household's food stamp benefits are reduced or terminated as a result of a mass change in the public assistance grant. However, the Department shall send individual notices to households to inform them of the change. If a household requests a fair hearing, benefits shall be continued at the former level only if the issue being appealed is that food stamp eligibility or benefits were improperly computed.

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Page 365.200365.200: Households with Boarders

The amount of payment a household receives from a boarder(s) shall be considered self-employment income to the household and handled in accordance with the instructions in this Section. Instructions for handling those households which own and operate a commercial boarding house are set forth in Section 365.900.

When determining a household's eligibility and benefit level, boarders shall not be considered members of the household nor shall their income and resources be considered available to the household.

(A) Income from Boarders

All direct payments to the household for room and meals, including contributions to the household's shelter expenses, shall be considered earned income to the household. Shelter expenses paid directly to someone outside the household shall not be counted as income to the household.

(B) Cost of Doing Business

After determining the income the household receives from boarders, the worker shall exclude from the income that portion which is the cost of doing business. The cost of doing business shall be equal to either of the following. However, the amount allowed as a cost of doing business can not exceed the amount of payment the household receives from the boarder.

- (1) The maximum coupon allotment for a household size that is equal to the number of boarders; or
- (2) The actual documented cost of providing lodging and meals if the actual cost exceeds the amount of (1) above. If actual costs are used, only separate and identifiable costs of providing lodging and meals to boarders can be excluded.

(C) Deductible Expenses

The households countable self-employment income from boarders (after excluding the cost of doing business) is added to any other earned income prior to applying the earned income deduction.

Shelter costs for households with boarders shall not include any shelter expenses paid by the boarder directly to a third party, such as the landlord or utility company.

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365.240: Households with Boarders

Households which operate a commercial boarding house or which contain boarders may participate in the Food Stamp Program if otherwise eligible. The income from boarders is considered earned self-employment income.

365.250: Determining Eligibility and Benefit Level of Households With Boarders

(A) Household Composition. Persons paying a reasonable amount for board are non-household members and shall be excluded when determining household size.

(B) Non-Financial Eligibility. Households with boarders are certified in accordance with all the normal non-financial eligibility standards.

(C) Financial Eligibility. Households with boarders are certified in accordance with all the normal financial eligibility standards. For owners of a commercial boarding house net self-employment income from boarders is calculated in accordance with Sections 900-930. For all other households net self-employment income from boarders is calculated as follows.

(1) Gross income from Boarders - All direct payments to the household for room and meals, including contributions to the household's shelter expenses, are counted as income to the household. Shelter expenses paid directly by boarders to someone outside of the household are not counted as income to the household.

(2) Cost of doing Business - After determining the income received from the boarders, the worker shall exclude that portion of the boarder payment which is a cost of doing business. The cost of doing business is equal to one of the following provided that the amount allowed as the cost of doing business shall not exceed the payment the household received from the boarder for lodging and meals.

- a. The cost of the Thrifty Food Plan for a household size that is equal to the number of boarders; or
- b. the actual documented cost of providing room and meals, if the actual costs exceeds the Thrifty Food Plan. If actual costs are used, only separate and identifiable costs of providing room and board to the boarder are excluded.

(D) Determining Benefit Level. The net self-employment income from boarders is added to any other earned income and the 20% earned income deduction applied to the total earned income amount. Shelter costs for

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households with boarders shall not include any shelter expense paid by the boarder directly to a third party, such as the landlord or utility company. The calculation leading to a determination of the benefit level or monthly allotment is done in accordance with 106 CMR 364.500.

365.290: Work Registration for Members of a Household with Boarders

Unless member(s) of a household with boarders meet the work registration exemptions in 106 CMR 362.320 or the self-employment exemption in Section 910, work registration is required as a condition of initial and continuing eligibility for the Food Stamp Program.

365.300: Strikers

No household shall be denied participation solely on the grounds that a member of the household is not working because of a strike or lockout at his or her place of employment unless the strike has been enjoined under Section 208 of the Labor-Management Relations Act (Taft-Hartley Act) or under Section 10 of the Railway Labor Act.

365.310: Determining Eligibility and Benefit Level of Strikers

Striker households are to be certified in accordance with the normal financial and non-financial eligibility standards. Contact with union and company officials should be maintained to determine the probable length of the strike and to verify wages received from the struck company or striker's benefits or other aid from the union. However, the services of individuals or organizations involved in a strike or lockout shall not be used to perform certification interviews of applicants. In addition, such individuals or organizations shall not be permitted access to food stamp ATP cards or other documents, nor shall the facilities of such individuals or organizations be used in conjunction with the certification of such applicants.

(A) Scheduling Intake for Strikers. Striker households may be entitled to expedited certification and issuance. Destitute and zero net income striker households are eligible for an over-the-counter ATP.

(B) Income. The worker must be alert to the necessity of documenting and verifying the income of all household members. All income expected to be received by the striker during the certification period, including pay, strike benefits, and other union benefit payments, must be considered when determining eligibility. Strike benefits are counted as unearned income.

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Households with a striking member who are eligible for program benefits (See Section 361.240(E) for eligibility restrictions) shall have their benefits calculated as follows:

- (A) The household's income as it stood prior to the strike and income anticipated by the household, such as income from the receipt of strike benefits or from temporary employment during the strike, shall be used to calculate food stamp benefits. The household's regular monthly earned income attributable to the job on which the strike occurred, shall remain the same during the strike as if the household member were still working.
- (B) The household shall not receive an increased food stamp allotment as a result of the decrease in income of the striking member.
- (C) The striking member is subject to work registration requirements set forth in Section 362.300.

365.400: Migrant Farm Laborers, Migrant Households and School Employees

Because of the way these households receive income, special certification procedures are required.

365.410: Resident Farm Laborers

Resident farm laborers may work for one employer or for a number of employers during the year. The certification procedures for these households differ depending on the household's receipt of income.

- (A) Stable Income. Some farm laborers are normally employed for the entire year and receive a regular monthly salary. These households can be certified for up to one year providing the receipt of regular income can be predicted and household circumstances are not likely to change.

- (B) Irregular Income

(1) One employer - In some instances the farm laborer household resides year round on one farm, but is paid only during the work season. During the non-work season, the household may receive advance or deferred payments. The worker may have some difficulty in assigning an income figure to the farm worker whose income is high during the work season and correspondingly low during the non-work season when income is only from advance or deferred payments. Since the variation in income between the two cycles may be quite substantial, averaging income over the

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(C) Resources. The resource eligibility standards continue to apply during the strike.

365.320: Certification Periods

Households containing one or more persons subject to a lockout or on strike from their place of employment shall not be certified for periods of more than one month if the household is certified before the 15th day of month of application. Otherwise the maximum certification period is two months.

365.330: Work Registration for Strikers

(A) Registration Requirement. Strikers must register for work as a condition of initial and continuing eligibility unless exempt under the provisions of 106 CMR 362.320.

(B) Suitability Requirement. If the strike is enjoined under Section 208 of the Labor Management Relations Act (Taft-Hartley Act) or under Section 10 of the Railway Labor Act and the striker still refuses to return to work, the striker shall be considered out of compliance with 106 CMR 362.340 (B) which requires that a work registrant accept a bona-fide offer of suitable employment.

365.400: Migrant Farm Laborers, Migrant Households and School Employees

Because of the way these households receive income, special certification procedures are required.

365.410: Resident Farm Laborers

Resident farm laborers may work for one employer or for a number of employers during the year. The certification procedures for these households differ depending on the household's receipt of income.

(A) Stable Income. Some farm laborers are normally employed for the entire year and receive a regular monthly salary. These households can be certified for up to one year providing the receipt of regular income can be predicted and household circumstances are not likely to change.

(B) Irregular Income.

(1) One employer - In some instances the farm laborer household resides year round on one farm, but is paid only during the work season. During the non-work season, the household may receive advance or deferred payments, sometimes known as "furnish". The worker may have some difficulty in assigning an income figure to the farm worker whose income is high during the work season and correspondingly low during the non-work season when income is only from advance or deferred payments. Since the variation in income between the two cycles may be quite substantial, averaging income over the

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certification period might tend to inhibit households from participating during the non-work period of low income. Even if income is prorated unevenly over the certification period to account for such variations, the income figure assigned during the low period might not be truly representative of the actual cash available to the household. For this reason, consideration should be given to certifying the household for lesser periods to take into account the income actually available to the household.

(2) More than one Employer. Farm laborer households which reside on the farm year round, but do not receive advance or deferred payments will most likely have income from another source during the non-work season. These households should be assigned shorter certification periods in accordance with the predictability of the receipt and amount of income.

(C) Work Registration. Resident farm laborers must register for work during the non-work season unless exempt under the provision of 106 CMR 362.320.

365.420: Migrant Farm Laborers

(A) Definition. Seasonal migrant farm laborers are individuals who move from one region or locale to another to engage in or seek farm, land, or crop cultivation activities which are seasonal. Migrant farm laborers travel completely within a state or may move across many states, traveling in a seasonal pattern.

(B) Resources. Special care should be taken in dealing with migrants to determine if there are out-of-state resources or income from real property in the home-base area. For example, a migrant, who claims Texas as a home-base area and who is applying for food stamps in Massachusetts should be questioned as to the availability of resources in Texas as well as Massachusetts. Particular attention should be paid to real property in the home-base area. Each applicant household is permitted one home and lot as an exemption from resources. If the applicant has a home and lot in Texas and does not own a residence in Massachusetts, the Texas home will be exempt as a resource. Shelter costs for the home when not occupied by the household because of employment may be allowed under certain circumstances. To be included in the household's shelter costs, the household must intend to return, the current occupants of the home, if any, must not be claiming the shelter costs, and the home must not be leased or rented. Verification requirements for these expenses are discussed in 106 CMR 361.500. Additionally, the worker should explore the possibility that out-of-state real property is being rented or is producing income in some way. If such property is producing income, such income must be added to all other household income in determining eligibility and basis of issuance.

(C) Income. Migrant households are subject to the normal income eligibility standards.

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(D) Expedited Service. A migrant household newly arrived in an area usually has little or no income and may be eligible for expedited certification and issuance.

(E) Work Registration. Employable members of migrant households who are not employed at least 30 hours a week or receiving weekly earnings equal to the Federal minimum wage multiplied by 30 hours must register for and accept suitable employment in the same manner as other persons. Growers should be made aware of the fact that migrants are being registered with DES and that they can obtain workers there.

365.430: School Employees

Teachers and other school employees who work under a renewable annual contract will be considered to be receiving compensation for an entire year even though pre-determined non-work periods are involved and actual compensation is paid during the work periods only.

(A) Annual Contract

(1) Contract Renewal. The renewal process may involve signing a new contract each year; automatic renewal; or, as in cases of school tenure, rehire rights may be implied and thus preclude the use of a written contract altogether.

(2) Work - Non-Work Cycle. The fact that a contract is in effect for an entire year does not mean that the contract will stipulate work every month of the year. Rather, there may be certain predictable non-work periods or vacations, such as the summer break between school years.

(3) Income. Income from an annual contract will be considered as compensation for a full year regardless of the frequency of compensation whether stipulated in the terms of the contract, or determined at the convenience of the employer, or determined at the wish of the employee.

(3) Determining Eligibility and Benefit Level. School employees who derive their annual income in a period of time shorter than one year shall have that income averaged over a 12-month period, provided the income is not received on an hourly or piecework basis. To determine household eligibility, all other monthly income from other household members will be added to this average monthly income, and income exclusions and deductions applied in the normal manner. Once eligibility has been determined, the annualized income may either be averaged or prorated unevenly over the 12 months before adding it to other monthly income for determining the household's basis of issuance during the certification period.

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(C) Certification Periods for School Employees. Certification periods shall be assigned in accordance with 106 CMR 364.700 through 730.

(D) Work Registration. During non-work periods school employees are subject to the work registration requirements and must register for work unless exempt under the provisions of 106 CMR 362.320.

365.500 Households with Non-Household Members and Disqualified Members

Non-household and disqualified household members shall be disregarded when determining the size of the Food Stamp household. The resources and income of disqualified and non-household members shall be handled as follows in determining the eligibility and benefit level of the food stamp household.

365.510: Non-Household Members

Non-household members include ineligible students, ineligible aliens, and others (see 106 CMR 361.230). Non-household members who are otherwise eligible may participate in the Food Stamp Program as separate households.

(A) Applying Financial Eligibility Standards. The income and resources of the non-household member shall not be considered available to the household.

- (1) Cash payments from the non-household member to the household shall be considered countable income to the household.
- (2) Vendor payments made by the non-household member on behalf of the household shall be excluded as income to the household.
- (3) If the food stamp household shares deductible expenses with a non-household member(s), only the amount actually paid or contributed by the food stamp household shall be deducted as a household expense. If the payments or contributions cannot be differentiated, the expenses shall be prorated evenly among all household members including the non-household member(s) and only the Food Stamp household's prorated share deducted.

(B) Determining Eligibility and Benefit Level. The non-household member is excluded when determining the household's eligibility or benefit level.

(C) Actions Required for Certified Households with Non-Household Members
If a member of a certified household becomes a non-household member, the

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worker shall review the household's eligibility and benefit level and issue a Notice of Adverse Action if the household's benefits are to be reduced or terminated.

365.520: Disqualified Household Members

Individual household members may be disqualified from participation in the program for fraud, or for failure to meet the requirement to provide a Social Security number. During the period of time a household member is disqualified the following procedures shall be used to determine the eligibility and benefit level of any remaining household members.

(A) Applying Financial Eligibility Standards

- (1) Resources - the resources of the disqualified member shall continue to count as resources in their entirety to the remaining household members.
 - (2) Income - A prorata share of the income of the disqualified member shall be counted as income to the remaining members. This prorata share is calculated by first subtracting the allowable exclusions from the disqualified member's income and dividing the income evenly among the household members, including the disqualified member. All but the disqualified member's share is counted as income to the remaining household members.
 - (3) Deductible Expenses - The earned income deduction shall be applied to that portion of the disqualified individuals earned income which is attributed to the remaining household members. That portion of the household's allowable shelter and dependent care expenses which are either paid by or billed to the disqualified member shall be divided evenly among the household members, including the disqualified member. All but the disqualified member's share is counted as a deductible shelter expense for the remaining household members.
- (B) Determining Eligibility and Benefit Levels. The disqualified member shall not be included when determining the household size for purposes of assigning a benefit level to the household or for purposes of comparing the household's monthly income with the income eligibility standards.

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(C) Actions Required on Disqualification. Whenever an individual is disqualified, the worker shall determine the eligibility or ineligibility of the remaining household members based, as much as possible, on information in the case file and shall take the following action.

(1) Fraud Disqualification - If a household's benefits are reduced or terminated because one of its members has been disqualified for fraud, the worker shall notify the remaining members of their eligibility and benefit level at the same time the disqualified member is notified of the disqualification. The household is not entitled to a Notice of Adverse Action but may request a fair hearing to contest the reduction or termination of benefits.

(2) Social Security Number Disqualification. If a household's benefits are reduced or terminated because one of its members is being disqualified for failure to comply with the requirement to provide a Social Security number, the worker shall issue a Notice of Adverse Action which informs the household that the individual without a number is being disqualified, the reason for the disqualification, the eligibility and benefit level of the remaining members and the actions the household must take to end the disqualification.

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365.550: Residents of Shelters for Battered Women and Their Children

This section and the special provisions it contains, apply only to individuals residing in shelters for battered women and their children to which the shelters provide them with their meals.

(A) Definition. A shelter for battered women and children is defined as: A public or private non-profit facility that provides meals and lodging to battered women and their children. If a facility also serves other individuals, a portion of that facility must be set aside on a long-term basis to house only battered women and children.

Shelters that are authorized by the Food and Nutrition Service (FNS) of USDA to redeem stamps at a wholesale food store meet this definition. No further assessment of the eligibility of these centers is necessary.

(B) Household Definition. Women or women with their children residing in a shelter shall be considered individual household units for the purpose of applying for and participating in the program.

(C) Residency and Participation. The restrictions in Section 362.100 which prohibit an individual from participating as a member of more than one household or in more than one state in any given month do not apply to certain shelter residents. Shelter residents certified as a member of a household which contains the person who subjected them to abuse may apply for, and if eligible receive, an additional food stamp allotment as a separate household. Residents may receive an additional allotment as a separate household only once a month.

The Department shall take action to adjust the benefits of the resident's former food stamp household by either shortening that household's certification period and issuing a Notice of Food Stamp Termination (Section 364.840) or, acting on the reported change by issuing a Notice of Adverse Action (Section 364.860).

(D) Financial Eligibility and Deductable Expenses. Shelter residents who apply as separate households shall be certified solely on the basis of their income, resources, and the shelter expenses for which they are liable. The income, resources, and shelter expenses of their former household shall be disregarded. Resources held jointly with members of the former household shall be handled in accordance with Section 363.170(A). Room payments to the shelter shall be considered shelter expenses.

(E) Expedited Processing. Residents who are otherwise entitled to expedited certification and issuance shall be issued benefits in accordance with expedited issuance standards set forth in Section 364.900(A).

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Residents of drug/alcoholic treatment centers and group living arrangements who are considered residents of institutions (see 106 CMR 361.240) may be eligible to participate in the Food Stamp Program.

365.610: Drug/Alcoholic Treatment Centers

Drug addiction or alcoholic treatment and rehabilitation means any treatment and rehabilitation program conducted by a private nonprofit organization or institution which is certified by the appropriate State agency as providing treatment that can lead to the rehabilitation of drug addicts or alcoholics. Residents of these centers may elect to participate in the Food Stamp Program. Prior to certifying a resident of a drug/alcoholic treatment center the worker must verify that the center is private, nonprofit and that it is certified by the appropriate State agency. The organization or institution shall receive and spend the coupon allotment for food prepared by and/or served to the addict or alcoholic.

(A) Application Procedures. Residents must apply and be certified through the use of an authorized representative who is an employee of and designated by the organization or institution that is administering the treatment and rehabilitation program. Resident addicts and alcoholics shall be certified as one-person households using the same procedures that apply to all other households except that certification is completed through the use of an authorized representative.

365.620: Group Living Arrangements

A group living arrangement is defined for Food Stamp purposes as a community based residential facility operated by a public or private nonprofit organization or institution, authorized to serve no more than sixteen residents, and certified by the appropriate State agency under regulations issued pursuant to Section 1616(e) of the Social Security Act. To be eligible for food stamp benefits a resident must be blind or disabled and receiving benefits under Title XVI (SSI) or Title II (RSDI) of the Social Security Act.

Prior to certifying a resident of a group living arrangement the worker must verify that the facility is operated by a nonprofit organization or institution that is certified by the appropriate State agency, and that the facility is authorized to serve no more than sixteen residents.

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(D) Work Registration. Addicts and alcoholics who regularly participate in a treatment and rehabilitation program are exempt from work registration requirement (see 106 CMR 362.320). Participation may be verified through the organization or institution operating the program before granting the exemption, if the information is questionable.

(E) Rights of Certified Residents. Resident households have the same rights to Notice of Adverse Action, fair hearings and entitlement to lost benefits as do all other food stamp households.

365.620: Treatment Center Responsibilities

(A) Semi-Monthly Reports. Each treatment and rehabilitation center shall give the local office a semi-monthly list of currently participating residents.

(B) Reporting Changes. The treatment center shall notify the local office of changes in the (resident) household's income or other circumstances. The treatment center shall also notify the local office when the addict or alcoholic leaves the center.

(C) Actions When Resident Leaves the Center.

(1) If the ATP is received by the treatment center after a household leaves, the center shall return the ATP to the local office.

(2) If the household leaves after the ATP is received at the center, but before the 16th of the month, the treatment center shall provide the resident with on-half his (or her) monthly allotment and ID card. Once the household leaves the treatment center, the center is no longer allowed to act as that household's authorized representative.

(3) The treatment center shall provide the household, if possible, with a Change Report Form. The household is to use the form to report their new address and other circumstances after leaving the center. The center must advise the household to return the form to the appropriate office of the Department within 10 days.

365.630: Treatment Center Liability

(A) Misrepresentation of Fraud. The organization or institution is responsible for any misrepresentation or fraud which it knowingly commits in the certification of center residents. As an authorized representative, the organization or institution must be knowledgeable about households' circumstances and should carefully review those circum-

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(A) Application Procedures. Residents of group living arrangements may apply and be certified through the use of an authorized representative who is an employee of and designated by the facility, or apply and be certified on their own behalf or through the use of an authorized representative of their own choice. The facility shall make the determination that a resident must apply through the facility's authorized representative, or may apply on his/her own behalf or through the use of an authorized representative of his/her own choice. The determination shall be based on the resident's physical and mental ability to handle his/her own affairs. All of the residents of the group living arrangement do not have to be certified through an authorized representative or individually in order for one or the other method to be used.

(1) Group Living Arrangement as Authorized Representative.

Residents that apply through the use of the facility's authorized representative shall have their eligibility determined as one person households. The facility shall receive and spend the residents' coupon allotment for food to be prepared and served to the eligible residents, or may allow the residents to use any portion of their allotments on their own behalf.

(2) Residents Acting on Their Own Behalf. When a resident, or group of residents, applies and is certified on their own behalf or through the use of an authorized representative of their own choice, they may return the coupon allotment to the facility to be used to purchase food for meals served either communally or individually to eligible residents, use the coupons to purchase meals prepared and served by the facility, or use any portion of the coupons to purchase and prepare food for their own consumption.

365.630: Certification of Residents

(A) Application Processing

(1) Expedited Service. Residents of drug/alcoholic treatment centers and group living arrangements who are destitute or at zero net income for the month of application are entitled to expedited certification and issuance. Residence and identity of the applicant and the eligibility of the facility as defined in section 365.610 and 365.620 shall be verified prior to the issuance of over-the-counter ATP's. Documentation of other eligibility factors that were postponed to expedite certification must be complete prior to issuance of a second monthly allotment.

(2) Normal Processing Standards. When normal processing standards apply, the worker must complete the verification and documentation requirements prior to making an eligibility determination for the initial application.

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(B) Determining Shelter Costs for Residents. When residents make a combined payment for meals and lodging (shelter), the cost of shelter shall be equal to the difference between the amount of the room and board payment and the maximum coupon allotment for the appropriate Food Stamp household size.

(C) Recertification and Changes During the Certification Period. The worker shall recertify residents and process changes in household circumstances using the same standards that apply to all other food stamp households.

(D) Rights of Certified Residents. Resident households have the same rights to notices of adverse action, fair hearings and entitlement to lost benefits as do all other food stamp households.

(E) Work Registration. Addicts and alcoholics who regularly participate in a treatment and rehabilitation program are exempt from the work registration requirement (see 106 CMR 362.330). Participation may be verified through the organization or institution operating the program before granting the exemption, if the information is questionable.

365.640: Treatment Center and Group Living Arrangement Responsibilities

(A) Monthly Reports. Each treatment center and group living arrangement shall give the local office a monthly list of currently participating residents. This list shall include a statement signed by a responsible facility official attesting to the validity of the list.

(B) Reporting Changes. Treatment centers and group living arrangements, when acting as an authorized representative, shall notify the local office of changes in the (resident) household's income or other circumstances. The facility shall also immediately notify the local office when a resident leaves the facility.

(C) Actions When a Resident Leaves the Facility.

(1) When a resident leaves a treatment center or a group living arrangement which is acting as the resident's authorized representative, the following rules apply.

a. If the ATP is received after the household leaves, the facility shall return the ATP to the local office.

b. If a household leaves the facility after the ATP is received and transacted, the facility shall provide the household with its full monthly allotment if no coupons have been used on behalf of that household. This applies at any time during the month.

c. If a household leaves the facility prior to the 16th day of the month and coupons have been spent on behalf of the household, the facility shall provide the household with one-half of

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its monthly allotment and ID card.

d. If a household leaves the facility on or after the 16th day of the month and any coupons have been spent on behalf of the household, the household does not receive any coupons.

e. Once a household leaves, the facility is no longer allowed to act as that household's authorized representative.

(2) When a resident or group of residents are certified on their own behalf, the following apply:

a. If the residents retain use of their coupons, they are entitled to keep the coupons when they leave the facility. If a group of residents has applied as a household and retain use of their coupons, a prorata share of the remaining coupons shall be provided to any departing member.

b. If a group of residents has been certified as a household and has returned their coupons to the facility to use, a departing member shall be given a prorata share of one-half of the household's monthly allotment if leaving prior to the 16th of the month.

(D) Change Report Form. The treatment center or group living arrangement shall (if possible) provide the household with a Change Report Form. The household is to use the form to report its new address and other circumstances to the Department after leaving the facility. The facility must advise the household to return the form to the appropriate office of the Department within 10 days.

365.650: Liability of Facility as Authorized Representative

(A) Misrepresentation or Fraud. The organization or institution is responsible for any misrepresentation or fraud which it knowingly commits in the certification of residents. As an authorized representative, the organization or institution must be knowledgeable about households' circumstances and should carefully review those circumstances with residents prior to applying on their behalf. The organization or institution is strictly liable for all losses or misuse of food coupons held on behalf of resident households and for all overissuances which occur while the households are residents of the facility.

(B) Claims for Overissuances. Whenever an overissuance is discovered, whether by the worker, the Department, or the United States Department of Agriculture, a claim determination shall be established against the organization or institution to recover the value of the overissuance.

365.660: Facility Penalties and Disqualifications

The United States Department of Agriculture may disqualify or penalize an organization or institution if it is determined administratively or judicially that coupons were mis-appropriated or used

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for purchases that did not contribute to a certified household's meals. The worker shall promptly notify the Office of Assistance Payments, 600 Washington Street, Boston, MA 02111, when s/he has reason to believe that an organization or institution is misusing coupons in its possession. However, the Department shall not take any action against the organization or institution prior to United States Department of Agriculture action.

365.670: Disqualified Treatment Centers and Group Living Arrangements

The Department shall suspend the authorized representative status of any treatment center or group living arrangement that is disqualified by the United States Department of Agriculture. The authorized representative status shall remain suspended for as long as the facility is disqualified.

365.680: Loss of State Agency Certification

A drug/alcoholic treatment center or a group living arrangement that loses its State agency certification may not participate in the Food Stamp Program.

365.690: Residents of Disqualified and Decertified Facilities

(A) Drug/Alcoholic Treatment Centers. Residents of a drug/alcoholic treatment center that has its status as an authorized representative suspended or loses its State agency certification are ineligible to participate in the Food Stamp Program.

(B) Group Living Arrangements. Residents of a group living arrangement that has its status as an authorized representative suspended or loses its State agency certification shall be ineligible unless they apply and are certified on their own behalf. These residents may still participate if otherwise eligible. However, their coupon use shall be restricted in that coupons may not be turned over to facility either to purchase food or for meals.

(C) Notice to Residents. Residents whose eligibility is terminated because the facility in which they live loses its State agency certification or has its status as an authorized representative suspended are not entitled to advance notice of adverse action. However, they shall receive a Notice of Ineligibility explaining the termination and when it will be effective.

365.700: Students

A student is an individual enrolled in any kindergarten, grade school, vocation school, technical school, training program, college, or university at least half-time as defined by the institution. A student's status is not altered during temporary periods of time in

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which the school is not in session, such as summer vacations or semester breaks, provided s/he is enrolled for the next regular session.

Students require special procedures for the handling of income and the determination of eligibility. While such procedures are of primary importance in the certification of households consisting solely of students or where the student is the household head, these special handling procedures are equally applicable to households where the student is a dependent member.

365.710: Students Enrolled in Institutions of Higher Education

To be eligible to participate in the Food Stamp Program, students between the ages of 18 and 60 who are enrolled in an institution of higher education, as defined in section 365.740 (B) (1), must meet the student eligibility requirements set forth in 106 CMR 362.400 through 362.430.

365.730: Resources

Student households are subject to the resource eligibility standards set forth in 106 CMR 363.100 through 363.180. In determining resources of students, deferred payment loans and other monies which have been averaged as income (see Section 365.740 (A)) shall not be counted as a resource.

365.740: Income

Students as a rule have extremely uneven cash flows and have sources of income not normally available to other households.

(A) Income for Educational Purposes. This includes scholarships, fellowships, educational grants, deferred payment loans for education, veterans education benefits and the like, which are used for education.

(B) Excluded Educational Expenses. The income described in (A) above is excluded to the extent that it is used for tuition and mandatory school fees at an institution of higher education, including correspondence schools at that level, or a school at any level for the physically or mentally handicapped.

(1) Institution of Higher Education - is any institution or program which is recognized by a Federal, State, or local government agency and provides post high school education. This includes, but is not limited to, colleges, universities and technical schools.

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(2) Mandatory Fees - are those fees charged to all students or those fees charged to all students within a certain curriculum. For example, uniforms, lab fees, or equipment charged to all students to enroll in a chemistry course are mandatory fees. Because transportation, supplies, and textbook expenses are not uniformly charged to all students, an income exclusion cannot be allowed for these costs.

(3) Excluded Reimbursements - Reimbursements are payments to the student for past or future expenses from a source outside the household. Reimbursements are excluded from income to the extent that they do not exceed the actual incurred expense and do not represent a gain or benefit to the student. (See 106 CMR 363.230). For example, reimbursements for specific educational expenses, such as travel or books would be excluded from income. However, allowances for normal living expenses such as food, clothing, or rent would not be excluded from income.

a. To be excluded, these payments must be provided specifically for an identified expense, other than normal living expenses, and be used for the purpose intended.

b. When a reimbursement, including a flat allowance, covers multiple expenses, each expense does not have to be separately identified as long as none of the reimbursement covers normal living expenses.

c. Reimbursements shall not be considered to exceed actual expenses unless the provider or the household indicates the amount is excessive.

365.750: Determining Countable Income From Educational Grants and Reimbursements

Before determining the student household's eligibility the worker must calculate the student's income from educational grants and reimbursements. The countable income from these sources is classified as unearned income.

(A) Income From Educational Grants.

(1) Determine the total cash value of all scholarships, educational grants, deferred payment loans, or other monies received in a one-time payment for expenses of education.

(2) Exclude (subtract) from such total all tuition and mandatory fees allowed by 106 CMR 363.230 (D) (not to include the cost of books, meals at school, transportation or supplies) paid or expected to be paid for the period such monies are intended to cover.

(3) Average the remainder over the period such monies are intended to cover. This figure is the monthly countable income derived from educational grants. etc.

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- (1) Determine the total cash value of all reimbursements received by a student.
- (2) Exclude (subtract) from this amount that portion of the reimbursement which is for educational expenses allowed by 365.740.
- (3) Average the remainder over the period the reimbursement was intended to cover. This figure is the monthly countable income derived from educational reimbursements.

365.760: Certification Periods

Most students will be required to register for full time work during school vacations and recesses of at least 30 days. The worker should take this, as well as the length of the school year, into consideration when assigning certification periods to student households.

365.770: Disqualified or Ineligible Students

A student may be disqualified for failure to meet the student work registration requirements, for fraud, or for failure to comply with the requirement to provide a Social Security number. A student is ineligible if s/he does not meet the tax dependency criteria. To determine the eligibility and benefit level of households with disqualified and ineligible students see Sections 365.500 through 365.520.

365.800: Destitute and Zero Net Income Households

Households defined as destitute and all households with zero net income in the month of application shall receive benefits on an expedited basis. This section provides the income calculation procedures, certification and verification procedures, the processing standards, and other special procedures applicable only to these households. These procedures may be used at recertification as well as initial certification. Households requesting, but not entitled to expedited service shall have their applications processed in accordance with normal certification standards.

365.810: Zero Net Income Households

Expedited certification and issuance shall be provided to households at zero net income level, after allowable deductions, counting all income received or anticipated to be received in the month of application.

365.820: Destitute Households

Certain households may have little or no income at the time of ap-

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- (1) Determine the total cash value of all reimbursements received by a student.
- (2) Exclude (subtract) from this amount that portion of the reimbursement which is for educational expenses allowed by 365.740.
- (3) Average the remainder over the period the reimbursement was intended to cover. This figure is the monthly countable income derived from educational reimbursements.

365.800: Destitute and Zero Net Income Households

Households defined as destitute and all households with zero net income in the month of application shall receive benefits on an expedited basis. This section provides the income calculation procedures, certification and verification procedures, the processing standards, and other special procedures applicable only to these households. These procedures may be used at recertification as well as initial certification. Households requesting, but not entitled to expedited service shall have their applications processed in accordance with normal certification standards.

365.810: Zero Net Income Households

Expedited certification and issuance shall be provided to households at zero net income level, after allowable deductions, counting all income received or anticipated to be received in the month of application.

365.820: Destitute Households

Certain households may have little or no income at the time of ap-

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plication even though they receive income at some other time during the month of application. These households are not always at zero net income level. The following procedures shall be used by the worker to determine when households in these circumstances may be considered destitute.

(A) Income Source. In order to determine destitution the worker must first identify the household's income source. A household member who changes jobs but continues to work for the same employer shall be considered as still receiving income from the same source. Similarly, a self-employed household member who secures contracts or other work from different customers shall still be considered as receiving income from the same source. A migrant farm worker's source of income shall be considered to be the grower for whom the migrant is working at a particular point in time, and not the crew chief. A migrant who travels with the same crew chief but moves from one grower to another is considered to have moved from a terminated to a new source.

(B) Income From a Terminated Source. Households whose only income for the month of application was from a terminated source are destitute for food stamp purposes. Income is considered terminated when the income was received prior to the date of application, and

(1) income that is received monthly or more frequently will not be received again from the same source in the month of application or in the month following application; or

(2) income that is normally received less often than monthly will not be received in the month the next payment is normally received.

A household may have lost its sole source of income because of a lay-off, a termination of Unemployment Compensation benefits, or other comparable circumstances. The household may be a migrant household which has received the last wages from a grower. These households are destitute for food stamp purposes and should be provided expedited service because they may not be able to wait as long as 30 days for food assistance.

For example, an individual is laid off on January 5th, receives his last check on January 12th and on January 18th applies for food stamps. S/he is destitute for food stamp purposes because the only income received on or anticipated to be received during the month of application is from a terminated source.

If a household's only income is received on a quarterly basis (i.e., on January 1, April 1, July 1 and October 1), and the household applies in mid January, the income should not be considered as coming from a

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terminated source merely because no further payments will be received in the balance of January or in February. The test for whether or not this household's income is terminated is whether the income is anticipated to be received in April.

(C) Income From a New Source. Households whose only income for the month of application is from a new source are destitute for food stamp purposes if the income to be received during the 10 calendar days following the date of application will not be more than \$25. Income is considered to be from a new source when the income will be received after the date of application, and

- (1) income that is normally received monthly or more frequently is considered as from a new source if no more than \$25 has been received from that source within 30 days prior to the date the application was filed; or
- (2) income that is normally received less often than monthly is considered to be from a new source when no more than \$25 was received from the income source within the last normal interval between payments.

These households may expect to start receiving income from a new job or may have applied for, but have not yet begun to receive benefits from public assistance, Unemployment Compensation, social security, SSI, or a similar program. These households may be totally without income for a number of weeks before the new income begins and, therefore, be unable to meet their current food needs. For example, the only income for the month of application is a household member's Unemployment Compensation. The household files on November 5th, the UC will not be received until the 20th and was not received in the period of October 5th through November 5th, this household meets the "new source" criteria and is a destitute household entitled to expedited service. On the other hand, if a household applies in early January and expects to receive quarterly income beginning in late January, the income is from a new source only if no more than \$25 was received from that source between October and January.

(D) Income from Both a Terminated Source and a New Source.

Households which receive income from a terminated source prior to the date of application and income from a new source after the date of application are destitute for food stamp purposes if they receive no other income in the month of application from the terminated source and no more than \$25 from the new source in the 10 calendar days following the date of application. For example, a household which receives its last income from employment on December 1, applies for food stamps on December 4 and expects to receive Unemployment Compensation on December 31 would meet the definition of destitute.

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365.830: Identifying Destitute and Zero Net Income Households

Each office shall designate an individual(s) and back-up personnel to screen applications as they are filed and as individuals come into the office to apply so that households entitled to expedited certification and issuance can be identified and provided the service. All applications received from SSA must be prescreened for entitlement to expedited service on the day the application is received at the correct CSAO/WSO. A receptionist, volunteer or other employee may be assigned screening responsibilities. Households with greatest potential eligibility for expedited service include those claiming no gross income or low gross income, migrant households and a household with a terminated or new income source.

365.840: Processing Standards

Except as specified below, the CSAO/WSO shall provide an over-the counter ATP to households on the same day the household is determined eligible.

(A) Late Determinations. In some cases the worker may find a household entitled to expedited service that the screening process failed to identify. For these households the same day processing standard begins on the date the worker discovers the household is entitled to expedited service.

(B) Waiver of the Office Interview. When a household is entitled to expedited service and exempt from the interview requirement (see Section 361.190) or entitled to a waiver of the office interview (see Section 361.510), the worker shall conduct a telephone interview, unless the household cannot be reached, by the first working day following the date the application was filed.

If a household submits an unsigned application or an application that is not completely filled out and is subsequently interviewed by telephone, the worker shall complete the application during the interview. The completed application will be mailed to the household on the same day for signature. For these households the same day processing standard begins on the date a completed and signed application is received rather than the date the application was filed. Households unable to appoint an authorized representative and not required to come into the office as part of the certification process shall have their ATP mailed no later than the latest available mail pickup time in the community in accordance with same day issuance processing standards.

365.850: Determining Eligibility and Benefit Level

(A) Zero Net Income Households. These households have their eligibility and benefit level calculated for the month of application by consid-

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ering all income received or anticipated to be received during the certification period.

(B) Destitute Households. These households shall have their eligibility and level of benefits calculated for the month of application by considering only income which is received between the first of the month and the date of application. Any income from a new source that is anticipated after the day of application shall be disregarded. Because only anticipated income is disregarded, destitute households may not always be at zero net income level.

(1) Travel Advances as Income. Some employers provide travel advances to cover the travel costs of new employees who must journey to the location of their new employment. To the extent that these payments are excluded as reimbursements, receipt of travel advances will not affect the determination of when a household is destitute. However, if the travel advance is by written contract an advance on wages that will be subtracted from wages later earned by the employee, rather than a reimbursement, the wage advance shall count as income. Nevertheless, the receipt of a wage advance for the travel costs of a new employee shall not affect the determination of whether subsequent payments from the employer are from a new source of income, nor whether a household shall be considered destitute. For example, if a household applies on May 10, has received a \$50 wage advance for travel from its new employer on May 1, which by written contract is an advance on wages, but will not start receiving any other wages from the employer until May 30, the household shall be considered destitute. The May 30 payment shall be disregarded, but the wage received prior to the date of application shall be counted as income.

(2) Households with Income Averaged Annually. Households whose income must be averaged on an annual basis, or averaged over the period the income is intended to cover, shall have the income averaged and assigned to the appropriate months of the certification period before determining whether a household is destitute. If the averaged income does not come from a new or terminated source and is assigned to the month of application, the household shall not be considered destitute. For example, a self-employed household whose total annual income is received in a few months in the year shall not be considered destitute simply because it does not receive payments in those other months. On the other hand, if the income which must be averaged is itself from a new or terminated source, the receipt of the income in the month of application may result in a destitute determination. For example, a

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student applies on September 6th. The only income received or anticipated to be received during September is a de-fered educational loan which is anticipated to be received after September 20th. The loan, minus appropriate exclusions, shall be averaged over the period it is intended to cover including the month of September. However, the student applicant meets the definition of destitute because his only income for the month of application is from a new source and will not be received during the 10 days following the date of application. Because the student is destitute, the anticipated income is disregarded when determining eligibility and benefit level

- (C) Initial Month's Benefits. The proration of benefits for the initial month of certification applies to destitute and zero net income households. Refer to Section 364.650.

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Residence and identity shall be verified prior to issuing an over-the-counter ATP. Verification of other eligibility factors may be postponed to expedite certification. When necessary, the worker shall assist the household in obtaining the necessary verification (see 106 CMR 361.600).

(A) Required Verification. The household's identity and residency must be verified through a collateral contact (see 106 CMR 361.640(B)) or readily available documentary evidence. Examples of acceptable documentary evidence which the household may provide include, but are not limited, to, a driver's license, work or school I.D., voter registration card, or birth certificate. The household should show a picture I.D. with a current address or substitute two alternative verifications of residence and identity. If the worker finds information questionable, s/he should make collateral contacts to clear up any inconsistency prior to issuance of the over-the-counter ATP.

(B) Income Verification. The household's income statements shall be verified through a collateral contact or readily available documentary evidence whenever it can be done in sufficient time to meet the expedited processing standards. However, same day issuance shall not be denied solely because income has not been verified.

(C) Postponed Verification. All other verification is postponed to expedite certification. However, if the household is able to provide all needed verification and the delivery standards are still met, verification may be completed.

365.865: Social Security Number

Households entitled to expedited service shall not be required to provide or apply for Social Security numbers until after they have received their first allotment. However, these households shall be required to provide Social Security numbers before their next issuance. Those households unable to provide the required Social Security numbers or who do not have numbers shall be allowed 90 days to obtain Social Security numbers, in accordance with 106 CMR 362.530.

365.870: Work Registration

Eligibility for expedited service does not exempt any household member from completing the work registration requirement prior to certification.

365.880: Assigning Certification Periods

Households that are certified on an expedited basis and have provided all necessary verification prior to certification shall be assigned a normal certification period.

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Households that are certified on an expedited basis but have postponed providing verification shall be certified for the month of application only or the month of application and the subsequent month if they applied after the 15th of the month. Those households that are assigned a two month certification period shall, however, be issued benefits for the month of application only. They must be informed on the Notice of Eligibility that they will receive no further benefits until the postponed verification is provided. When these households provide the postponed verification they shall be provided their second month's benefits within five working days or the first of the second month, whichever is later.

365.890: Eligibility for Expedited Issuance in Subsequent Months

There is not limit to the number of times a household can be certified under the expedited procedures, provided the household either completes the verification requirements that were postponed at the last expedited certification or has been certified under normal processing standards since the last expedited certification. For example, a household is certified under expedited procedures in February. If the household again requests expedited service in March, it must provide February's verification or be certified under normal standards. If the household does not request expedited service until September, it must either: provide February's verification or have been certified under the normal certification procedures in the interim. If the household has not been certified normally since February and cannot complete the verification from February, the household shall be ineligible for expedited service in September.

365.900: Households with Income from Self-Employment

The following sections describe the procedures for handling income from a self-employment enterprise and for determining the eligibility and benefit level of households when all or part of their income is from self-employment.

365.910: Roomer, Boarder, Rental Income

Income from roomers, rental property, and boarders of a commercial boarding house is considered self-employment income for program purposes. A household's countable income from these self-employment enterprises should be determined in accordance with the instructions in this Section. The income a household receives from a boarder, other than that received by a household who owns and operates a commercial boarding house, is also considered self-employment income but is handled in accordance with the procedures set forth in Section 365.200.

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When all or part of a household's income is from self-employment, the household members must register for work unless exempt from the requirement.

(A) Exemptions

- (1) The household member shall be exempt from the work registration requirement if s/he is actively engaged in the self-employment enterprise at least 30 hours per week, or if not working 30 hours per week, receiving weekly earnings at least equal to the hourly Federal minimum wage multiplied by 30 hours.
- (2) The household member shall be exempt if s/he is otherwise exempt under the provisions of 106 CMR 362.330.

(B) Seasonal Work

The circumstances of household members engaged in seasonal self-employment shall be carefully reviewed to determine if the minimum requirement is met in the off-season.

- (1) If the seasonal employment averages 30 hours of work per week or the minimum wage, multiplied by 30 hours, the household member is exempt from registering.
- (2) If the number of hours worked or wages earned does not meet the limits in (1) and the household member is not otherwise exempt, s/he must register during non-work periods.

365.930: Special Income Considerations(A) Income from Rental Property

- (1) The cost of doing business is always allowed, regardless of whether the income is classified as earned or unearned.
- (2) Income from rental property is considered earned income and entitles the household to the earned income deduction only if a member of the household is actively engaged in the management of the property at least an average of 20 hours per week.

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requirement.

(A) Exemptions

(1) The household member shall be exempt from the work registration requirement if s/he is actively engaged in the self-employment enterprise at least 30 hours per week, or if not working 30 hours per week, receiving weekly earnings at least equal to the hourly Federal minimum wage multiplied by 30 hours.

(2) The household member shall be exempt if s/he is otherwise exempt under the provisions of 106 CMR 362.320.

(B) Seasonal Work. The circumstances of household members engaged in seasonal self-employment shall be carefully reviewed to determine if the minimum requirement is met in the off-season.

(1) If the seasonal employment averages 30 hours of work per week or the minimum wage, multiplied by 30 hours, the household member is exempt from registering.

(2) If the number of hours worked or wages earned does not meet the limits in (1) and the household member is not otherwise exempt, s/he must register during non work periods.

365.930: Special Income Considerations

(A) Income from Rental Property

(1) The cost of doing business is always allowed, regardless of whether the income is classified as earned or unearned.

(2) Income from rental property is considered earned income and entitles the household to the twenty percent (20%) deduction only if a member of the household is actively engaged in the management of the property at least an average of 20 hours per week.

(B) Capital Gains as Income. The proceeds from the sale of capital goods or equipment related to the business is included when determining self-employment income. Even if only 50 percent of the proceeds from the sale of capital goods or equipment is taxed for Federal income tax purposes, the full amount of the capital gain shall be counted as income for food stamp purposes.

365.940: Allowable Costs of Producing Self-Employment Income

(A) Expenses. Allowable costs of producing self-employment income include, but are not limited to, the identifiable costs of labor, stock, raw material, seed and fertilizer, interest paid to purchase income producing property, insurance premiums, and taxes paid on income producing property.

FOOD STAMP PROGRAM
SPECIAL SITUATION HOUSEHOLDS(B) Capital Gains as Income

The proceeds from the sale of capital goods or equipment related to the business is included when determining self-employment income. Even if only 50 percent of the proceeds from the sale of capital goods or equipment is taxed for Federal income tax purposes, the full amount of the capital gain shall be counted as income for food stamp purposes.

365.940: Allowable Costs of Producing Self-Employment Income(A) Expenses

Allowable costs of producing self-employment income include, but are not limited to the identifiable costs of: labor (wages paid to an employee or work contracted out); stock (inventory); raw materials used to make a product; seed and fertilizer for farming; interest paid to purchase income producing property; insurance premiums; taxes, assessments, and utilities paid on income producing property; advertisement; licenses and permits; service and repair of income producing property; legal and professional fees; business supplies.

(B) Depreciation

Depreciation for equipment, machinery or other capital investments necessary to the self-employment enterprise shall be allowed as a cost of producing self-employment income.

The Federal or State income tax form for the most recent tax year shall be used for calculating depreciation on an annual basis. No depreciation is allowed on a capital asset unless it is documented by the appropriate State or Federal income tax form. Households that did not file a tax return or did not claim depreciation may still receive consideration for depreciation by filing an amended tax form for that year and presenting a copy of the amended form to the worker.

365.950: Expenses Not Allowed as a Cost of Producing Self-Employment Income

- (A) Payments on the principal of the purchase price of income producing real estate and capital assets, equipment, machinery and other durable goods. Interest payments are deductible.

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(B) Depreciation. Depreciation for equipment, machinery or other capital investments necessary to the self-employment enterprise shall be allowed as a cost of producing self-employment income.

The Federal or State income tax form for the most recent tax year shall be used for calculating depreciation on an annual basis. No depreciation is allowed on a capital asset unless it is documented by the appropriate State or Federal income tax form. Capital assets are assets of a permanent or fixed nature. (i.e, real property) or property employed in carrying on business or trade. Households that did not file a tax return or did not claim depreciation may still receive consideration for depreciation by filing an amended tax form for that year and presenting a copy of the amended form to the worker.

365.950: Expenses Not Allowed as a Cost of Producing Self-Employment Income

(A) Payments on the principal of the purchase price of income producing real estate and capital assets, equipment, machinery and other durable goods (interest payments are deductible).

(B) Net losses from previous periods of time.

(C) Federal, State and local income taxes, money set aside for retirement purposes, and other work-related personal expenses, (such as transportation to and from work). These expenses are accounted for by the 20 percent earned income deduction.

365.960: Averaging Self-Employment Income and Assigning Certification Periods

(A) Self-employment income which represents a household's annual support shall be averaged over a 12-month period, even if the income is received in a shorter period of time. For example, self-employment income received by farmers shall be averaged over a 12-month period if the income is intended to support the farmer on an annual basis. This self-employment income shall be annualized even if the household receives income from other sources in addition to self-employment.

(B) Self-employment income which is received on a monthly basis but which represents a household's annual support shall normally be averaged over a 12-month period. If, however, the averaged amount does not accurately reflect the household's actual circumstances because the household has experienced a substantial increase or decrease in business, the worker shall calculate the self-employment income based on anticipated earnings.

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- (B) Net losses from previous periods of time.
- (C) Federal, State and local income taxes, money set aside for retirement purposes, and other work-related personal expenses (such as transportation to and from work). These expenses are accounted for by the earned income deduction.

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- (B) Self-employment income which is received on a monthly basis but which represents a household's annual support shall normally be averaged over a 12 month period. If, however, the average amount does not accurately reflect the household's actual circumstances because the household has experienced a substantial increase or decrease in business, the worker shall calculate the self-employment income based on anticipated earnings.
- (C) Self-employment income which is intended to meet the household's needs for only part of the year shall be averaged over the period of time the income is intended to cover. For example, self-employed vendors who work only in the summer and supplement their income from other sources during the balance of the year shall have their self-employment income averaged over the summer months rather than a 12 month period.
- (D) If a household's self-employment enterprise has been in existence for less than a year, the income from that self-employment enterprise shall be averaged over the period of time the business has been in operation and the monthly amount projected for the coming year. However, if the business has been in operation for such a short time that there is insufficient information to make a reasonable projection, the household may be certified for less than a year until the business has been in operation long enough to base a longer projection.

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For the period of time over which self-employment is determined, add all gross self-employment income (including capital gains), exclude the cost of producing the self-employment income, and divide the self-employment income by the number of months over which the income will be averaged.

(B) Anticipated Income

For those households whose self-employment income is not averaged but is instead calculated on an anticipated basis, add any capital gains the household anticipates it will receive in the next 12 months, starting with the date the application is filed, and divide this amount by 12. This amount shall be used in successive certification periods during the next 12 months except that a new average monthly amount shall be calculated for this 12 month period if the anticipated amount of capital gains changes. Then add the anticipated monthly amount of capital gains to the anticipated monthly self-employment income, and subtract the cost of producing the self-employment income. Except for depreciation, the cost of producing the self-employment income shall be calculated by anticipating the monthly allowable costs of producing the self-employment income. Capital gains is the gain the household makes from the sale of a capital asset, such as real property used to carry out the household's business enterprise, in excess of the value of the property or cost of the property.

(C) Determining Monthly Food Stamp Income

To determine the monthly food stamp income for households with income from self-employment enterprises, the monthly net self-employment income is added to any other earned income, or in the case of unearned rental income to other unearned income, received by the household.

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earned income, less the 20 percent earned income deduction, is then added to all unearned monthly income received by the household. The standard deduction, dependent care and shelter costs are computed as for any other household and subtracted to determine the monthly net income of the household. Refer to 106 CMR 364, Tables 2 and 3 for the Net Monthly Income Eligibility Limits and the Issuance Tables.

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366.050: Introduction

When an applicant household is determined eligible to participate in the Food Stamp Program, the household is assigned a certification period. The responsibility for insuring the household's continuing eligibility during the certification period lies both with the recipient and the worker. The recipient must inform the worker of any changes in household circumstances that may affect household eligibility. The worker must act to insure that the food stamp household receives the benefits to which it is entitled on time and in the right amount. The actions the worker must take to accomplish this are called additional certification functions.

366.100: Changes During the Certification Period

When changes that occur within the certification period affect a household's eligibility or monthly allotment, action must be taken to adjust the household's eligibility. The worker shall advise households of their responsibility to report changes in income and household status within the required time period and shall take timely action to adjust certification based on these changes. Recipient and Department responsibilities are outlined below.

366.110: Household Responsibilities

Certified households are required to report certain changes within 10 days of the date the change becomes known to the household. The changes may be reported in person, by phone or by mail. The Department shall provide all certified households with a postage paid Change Report Form for reporting changes. The Change Report Form is given out at initial certification, whenever a Change Report Form is returned by a household, and at recertification, if the household needs a new form.

(A) Mandatory Change Reporting Requirements. The following changes must be reported within 10 days of the date the change becomes known to the household.

- (1) Changes in the source of income, or changes of more than \$25.00 in gross monthly income, except changes in the PA grant.
- (2) Changes in household composition, such as addition or loss of a household member.
- (3) Changes in residence and the resulting changes in shelter expenses,
- (4) When the value of cash on hand, stocks, bonds and money in bank accounts or savings institutions reaches or exceeds a total of \$1,500.

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366.050: Introduction

When an applicant household is determined eligible to participate in the Food Stamp Program, the household is assigned a certification period. The responsibility for insuring the household's continuing eligibility during the certification period lies both with the recipient and the worker. The recipient must inform the worker of any changes in household circumstances that may affect household eligibility. The worker must act to insure that the food stamp household receives the benefits to which it is entitled on time and in the right amount. The actions the worker must take to accomplish this are called additional certification functions.

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When a household's circumstances change and it becomes entitled to a different eligibility standard, the worker shall apply the different standard at the next recertification or whenever the worker changes the household's eligibility, benefit level or certification period, whichever occurs first.

366.110: Household Responsibilities

Certified households are required to report certain changes within 10 days of the date the change becomes known to the household. The changes may be reported in person, by phone or by mail. The Department shall provide all certified households with a postage paid Change Report Form for reporting changes. The Change Report Form is given out at initial certification, whenever a Change Report Form is returned by a household, and at recertification, if the household needs a new form.

(A) Mandatory Change Reporting Requirements

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- (1) Changes in the source of income, or changes of more than \$25.00 in gross monthly income, except changes in the PA grant.
- (2) Changes in household composition, such as addition or loss of a household member.
- (3) Changes in residence and the resulting changes in shelter expenses.
- (4) When the value of cash on hand, stocks, bonds and money in bank accounts or savings institutions reaches or exceeds a total of \$1,500.

(5) The acquisition of a licensed vehicle that is not a fully excluded resource (see 106 CMR 363.160(A)).

(6) Changes of more than \$25 in the household's monthly medical expenses.

(B) Failure to Report Required Changes. If a household fails to report a required change and as a result receives benefits to which it is not entitled, the worker must establish a claim against the household in accordance with sections 800 through 830. Individuals shall not be terminated for failing to report a change unless they are disqualified in accordance with the fraud disqualification process.

366.120: Department Responsibility To Take Timely Action

The Department shall not impose any reporting requirements on households except as provided in section 110. The worker shall act promptly on any reported change to determine if it affects the household's eligibility or monthly allotment.

Also, the worker must document the reported change in the case record, listing the date the Change Report Form or other notification was received, provide the household another Change Report Form and notify the household of the effect of the change, if any, on its benefits.

(A) Increases in Benefit Level Requiring Expedited Action. For certain reported changes the worker must follow expedited procedures to reflect the change in the household's monthly allotment.

(1) When a household reports a change in gross income or allowable deduction(s) which reduces the household's net food stamp income to zero, the worker must authorize a supplementary ATP for the month in which the change is reported.

(2) When a household reports the addition of a new household member who is not a certified member of another household, or reports a change in gross monthly income of \$50 or more, the worker must make the change effective in the first allotment issued ten (10) days after the date the change was reported. In no event shall the change take effect any later than the month following the month of the reported change. If the change is reported after the 20th of the month and it is too late in that month to adjust the next month's allotment, the worker must authorize a supplementary ATP to insure that the household receives the increase in benefits by the 10th day of the following month or the household's normal issuance date, whichever is later. For example, a household reports a decrease of \$75 in gross income and the change cannot be made effective for the June allotment. In this case, the worker must authorize a supplementary ATP to be issued by the 10th day of June or by the household's normal issuance date in June, whichever is later.

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(B) All Other Increases In Benefit Level. For all other increases in a household's benefit level the change shall be effective no later than the first allotment issued 10 days after the date the change was reported to the Department. For example, if a \$30 decrease in gross monthly income was reported by the household on May 28th, the household's monthly allotment for July must include the increase in benefits.

(C) Decreases in Benefit Level. If a household's benefit level decreases or the household becomes ineligible as a result of a change, the Department shall issue a Notice of Adverse Action within 10 days of the date the change was reported. The decrease in benefits shall be made effective no later than the next allotment following the month in which the advance notice period expires, provided a fair hearing and continuation of benefits have not been requested by the household.

(D) Verification of Reported Changes. Changes in actual utility expenses reported during a certification period must be verified if the source has changed or the amount has changed by more than \$25 since the last time they were verified. Changes in income reported during a certification period must be verified. Changes in medical expenses, including the amount of reimbursement (e.g., by a third party insurer) reported during a certification period must be verified if the amount has changed by more than \$25 since the last time they were verified. All other changes reported during a certification period are subject to the same verification requirements and procedures that apply at initial certification. Required verification must be obtained within certain time frames depending on whether the change results in an increase or decrease of the household's benefit level.

(1) Increase in Benefit Level. When the reported change results in a higher monthly allotment, required verification must be obtained prior to the issuance of the second normal monthly allotment after the change is reported. If the household fails to provide the verification, the worker shall reduce the household's monthly allotment to the original benefit level. These households are not entitled to advance Notice of Adverse Action. If the worker determines that the household has refused to cooperate in providing the verification, s/he must initiate Advance Notice of Adverse Action to terminate food stamp benefits for refusal to cooperate (see 106 CMR 361.400).

(2) Decrease in Benefit Level. When the reported change results in a lower monthly allotment, required verification must be obtained prior to a household's next recertification of eligibility.

(E) Failure to Act on Reported Changes. If the worker fails to take timely action on a reported change that would result in an increase in benefit level, lost benefits shall be restored to the household by

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a forward adjustment. If the worker fails to take timely action on a reported change that would result in a decrease in benefit level, a claim determination must be established against the household to recover the overpayment.

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366.130: Mass Changes

Certain changes initiated by the State or Federal government may affect all or a significant portion of the caseload. These changes include annual adjustments to the Maximum Gross Monthly Income Standards, Maximum Allowable Monthly Net Income Standards, the Shelter/Dependent Care deduction, the Standard deduction, the Standard Utility Allowance deduction(s) and the Maximum Monthly Coupon Allotments; periodic cost of living adjustments in Social Security, SSI, and other Federal benefits; periodic cost of living adjustments to PA grants; and other changes in the eligibility criteria based on legislative or regulatory amendments.

(A) Federal Food Stamp Program Changes. Federal adjustments to eligibility standards, coupon allotments, and income deductions shall be effective for all households at a specific point in time. The Department shall publicize these mass changes through the news media, posters in certification offices, issuance locations, or other sites frequented by certified households, or by mailing general notices to households.

(B) State Food Stamp Program Changes. Adjustments to the Standard Utility Allowance shall be effective for all households at one point in time. A Notice of Adverse Action is not required when a household's food stamp benefits are reduced or terminated as a result of a mass change in the Standard Utility Allowance. The Department shall publicize changes in the Utility Standard through the news media, posters in certification offices, issuance locations, or other sites frequented by certified households; or by mailing general notices to households.

(C) Changes to Grant Amounts of PA Households. When the Department makes an overall adjustment such as a cost of living increase to public assistance grants, including General Relief, corresponding adjustments in households' food stamp benefits shall be handled as a mass change.

(1) If the Department has at least 30 days advance knowledge of the amount of PA adjustments, food stamp benefits shall be recomputed and the new monthly allotment will be effective in the same month as the PA change. If the Department does not have sufficient notice, the food stamp change shall be effective no later than the month following the month the PA change was made.

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(2) A Notice of Adverse Action is not required when a household's food stamp benefits are reduced or terminated as a result of a mass change in the public assistance grant. However, the Department shall send individual notices to households to inform them of the change. If a household requests a fair hearing, benefits shall be continued at the former level only if the issue being appealed is that food stamp eligibility or benefits were improperly computed.

(D) Changes in Federal Benefit Payments. Changes in Federal benefits such as Social Security and SSI, shall be treated as a mass change.

(1) When the Department has at least 30 days advance knowledge of the amount of the adjustment to the Federal benefit, food stamp benefits shall be recomputed and the new monthly allotment will be effective the same month as the new Federal benefit amount. If the Department does not have sufficient notice, the food stamp change shall be effective not later than the month after the month in which the Federal benefit change was made.

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(2) A notice of adverse action is not required when a household's food stamp benefits are reduced or terminated as a result of a mass change in a federal benefit payment amount. However, the Department shall send individual notices to households to inform them of the change. If a household requests a fair hearing, benefits shall be continued at the former level only if the issue being appealed is that food stamp eligibility or benefits were improperly computed.

(E) Mass Changes Resulting from Implementation of the Food Stamp Act of 1977. The Department shall send an individual notice of adverse action to each household that receives a reduction or termination in benefits as a result of the new regulations which implement the Food Stamp Act of 1977. This notice must be mailed to the household at least ten days prior to the effective date of the proposed action. The notice of adverse action shall explain to the household that the change is the result of changes in federal law and that although the household has the right to request a fair hearing, benefits will be continued pending the fair hearing only if the household believes its eligibility or benefit level was computed incorrectly under the new law, or that the new law is being misapplied or misinterpreted.

366.140: Change Reporting Requirements for PA Households

Except for changes in grant amounts, PA households are subject to the same reporting requirements as all other food stamp households and shall use the postage paid Change Report Form. PA households which report a change in circumstances to the PA worker shall be considered to have reported the change for food stamp purposes.

366.150: Department Action on Reported Changes

Action shall be taken on all changes reported during a household's certification period in accordance with the timeliness standards prescribed in Section 366.120. Households shall be notified whenever their monthly food stamp allotment is changed as a result of changes in their public assistance grant or whenever their food stamp certification period is shortened to reflect changes in household circumstances (see Section 365.170).

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In cases jointly processed by SSA and the Department (see Section 361.190) in which the SSI determination results in denial, the worker shall send the household a notice of termination if the worker believes the households food stamp eligibility or benefit level may be affected. The notice shall advise the household that its certification period will expire in the month following the month in which the notice is sent and that it must reapply if it wishes to continue to participate. The notice shall explain that its certification period is expiring because of changes in circumstances and that it may be entitled to an out-of-office interview.

366.200: Notice of Adverse Action

Prior to taking action to reduce or terminate a household's benefits during the certification period, the

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worker shall, except as specified in section 210, provide the household with advance notice of adverse action. The Notice of Adverse Action shall be considered timely if it is mailed to the household at least 10 days prior to the effective date of the proposed action.

366.210: Changes Not Requiring Advance Notice

In the circumstances described below, food stamp benefits may be terminated or decreased without providing the household Advance Notice of Adverse Action and the right to a pretermination or a pre-reduction hearing.

- (A) The Department initiates a mass change as described in section 366.130.
- (B) The worker determines, on reliable information, that all members of the household have died.
- (C) The household's whereabouts is unknown and Department mail directed to the household has been returned by the post office indicating no forwarding address. However, the returned ATP must be made available to the household when the household's whereabouts is made known during the issuance period covered by the returned ATP.
- (D) The household has been receiving an increased monthly allotment to restore lost benefits, the restoration is complete, and the household is previously notified in writing of when the increased allotment would terminate.
- (E) The household's allotment varies from month to month within the certification period to take into account changes anticipated at the time of certification and the household was so notified at time of certification.
- (F) The household files a joint application for cash assistance and food stamp benefits, receives food stamp benefits pending the approval of the cash assistance grant and is notified at the time of certification that food stamp benefits will be reduced upon approval of the cash assistance grant.
- (G) A household member is disqualified for fraud, or the benefits of the remaining household members are reduced or terminated to reflect the disqualification of that household member. (The notice requirements for individuals or households affected by fraud disqualifications are explained under fraud hearings.)
- (H) The household's benefits are terminated or reduced as a result of the recertification process.
- (I) The household's benefits are increased as the result of a reported change and the household fails to provide verification of the reported change prior to the second normal monthly allotment after the change was reported.

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(J) The Department is terminating the eligibility of a resident of a drug or alcoholic treatment center or a group living arrangement because the facility has lost its State agency certification or has had its status as an authorized representative suspended due to disqualification by the United States Department of Agriculture.

366.220: Continuation of Benefits Pending the Fair Hearing Decision

If a household requests a fair hearing and continuation of benefits within the advance notice period, the household's participation in the program shall be continued on the basis authorized immediately prior to the Notice of Adverse Action unless the household specifically waives continuation of benefits. The benefits will continue until the Fair Hearing Decision is rendered or the certification period expires, whichever occurs first. If a hearing request is not made within the advance period, the benefits shall be reduced or terminated as proposed. However, if the household establishes that its failure to make the request within the advance notice period was for good cause, the worker shall reinstate the benefits to the prior basis.

366.300: Recertification

A household's food stamp benefits shall not continue beyond the certification period unless the household has been recertified. To recertify, the household must submit a new application, be interviewed, and provide required verification in accordance with timeliness standards set forth in section 366.320. Those households that timely recertify and are found eligible shall be entitled to uninterrupted benefits.

This section lists the responsibilities of the household and the Department in the recertification process.

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Households certified for one or two months shall receive, at the time of certification, a separate notice of recertification responsibilities entitled Notice of Food Stamp Termination. Those households certified for three months or more (except public assistance households) shall receive a separate Notice of Food Stamp Termination in the month prior to the last month of their certification period. This notice will be mailed by the Department no earlier than 15 days prior to the last month of the household's certification period but not later than the first day of the last month of the certification period. The contents of the notice are given in 106 CMR 364.840.

Unless it has been eleven months since their eligibility was last determined, public assistance households shall not receive a separate notice of recertification responsibilities. These households are recertified for food stamps at the same time as their public assistance redetermination regardless of whether their food stamp certification period has expired.

366.320: Household Responsibilities

(A) Filing a Timely Application. Households issued a Notice of Food Stamp Termination at the time of certification have 15 days from the date the notice is received to submit a timely application. The eligibility worker shall use the postmark on the notice, plus two days for mailing time, as an aid in determining if households were allowed adequate time. In cases of a dispute households may demonstrate that the notice was not, in fact, received in a timely manner.

Households sent a separate notice during their certification period shall be considered to have timely reapplied if they file a new application by the 15th day of the last month of their certification period.

(B) Being Interviewed. Households shall not be required to appear for an interview prior to the first day of the last month of their certification period or prior to the date they file a timely application for recertification. However, households which fail, without good cause, to appear for an interview scheduled after they file a timely application shall lose their rights to uninterrupted benefits.

(C) Providing Verification. The following verification requirements apply at the time of recertification.

(1) Gross Non-Exempt Income. The household's gross non-exempt income must be verified prior to recertification. Verification of exempt income is required when the information provided by the applicant/recipient is questionable (see 106 CMR 361.620). If all attempts to verify gross non-exempt income are unsuccessful because the person or organization providing the information has failed to cooperate, the worker must determine the household's gross monthly non-exempt income for certification based on the best available information.

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366.310: Notification to Recertify

Households certified for one or two months shall receive, at the time of certification, a separate notice of recertification responsibilities entitled Notice of Food Stamp Termination. Those households certified for three months or more (except public assistance households) shall receive a separate Notice of Food Stamp Termination in the month prior to the last month of their certification period. This notice will be mailed by the Department no earlier than 15 days prior to the last month of the household's certification period but not later than the first day of the last month of the certification period. The contents of the notice are given in 106 CMR 364.840.

Unless it has been eleven months since their eligibility was last determined, public assistance households shall not receive a separate notice of recertification responsibilities. These households are recertified for food stamps at the same time as their public assistance re-determination regardless of whether their food stamp certification period has expired.

366.320: Household Responsibilities

(A) Filing a Timely Application. Households issued a Notice of Food Stamp Termination at the time of certification have 15 days from the date the notice is received to submit a timely application. The eligibility worker shall use the postmark on the notice, plus two days for mailing time, as an aid in determining if households were allowed adequate time. In cases of a dispute households may demonstrate that the notice was not, in fact, received in a timely manner.

Households sent a separate notice during their certification period shall be considered to have timely reapplied if they file a new application by the 15th day of the last month of their certification period.

Households consisting of only SSI applicants or recipients (pure SSI households) may make a timely application for recertification at an SSA office. SSA will forward the completed application and all available verification to the appropriate CSAO/WSO.

(B) Being Interviewed. Households shall not be required to appear for an interview prior to the first day of the last month of their certification period or prior to the date they file a timely application for recertification. However, households which fail, without good cause, to appear for an interview scheduled after they file a timely application, shall lose their rights to uninterrupted benefits.

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(2) Alien Status. Verification of alien status is required prior to recertification only when the household reports a change in the alien status of the household member.

(3) Utility Expenses. Actual utility expenses higher than the standard allowance claimed by a household entitled to use the standard allowance must be verified if use of the actual utility expenses would result in a deduction. When the actual utility expenses cannot be verified in time to meet the recertification processing time standard, the standard allowance is used to determine the household's eligibility and benefit level. If the household subsequently verifies the actual utility expenses, the worker shall treat the information as a reported change. If the household is ineligible because the claimed but unverified utility expense is disallowed, the worker shall begin action to terminate benefits by sending the household an advance Notice of Adverse Action.

(4) Medical Expenses. The amount of allowable medical expenses, including the amount of reimbursement (e.g. by a third party insurer), must be verified prior to recertification if use of the expenses would actually result in a deduction. Additional verifications relevant to the claimed medical expenses, such as the allowability of service provided or the eligibility of the person incurring the cost, are not required unless the information provided by the applicant/recipient is questionable (see 106 CMR 361.620).

(5) Social Security Numbers. If a household member's Social Security number was not verified at the time of the initial certification, it must be verified prior to or at the time of recertification, in accordance with the procedures in 106 CMR 362.520.

(6) Other Eligibility Factors. All other eligibility factors, financial or non-financial, are verified prior to recertification when the information provided by the applicant is questionable and affects the household's eligibility and benefit level. Other eligibility factors include loans, liquid resources, residency, student eligibility, household composition, citizenship, circumstances relative to work registration and certain deductible expenses.

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Households consisting entirely of SSI recipients are entitled to a waiver of the face-to-face interview if the household is unable to appoint an authorized representative. Pure SSI households (i.e., consisting only of SSI applicants or recipients) which complete the application for recertification at the SSA office, shall not be required to appear at the CSAO/WSO for a second office interview, although an out-of-office interview may be conducted, if necessary.

(C) Providing Verification. The following verification requirements apply at the time of recertification.

(1) Gross Non-Exempt Income. The household's gross non-exempt income must be verified prior to recertification. Verification of exempt income is required when the information provided by the applicant/recipient is questionable (see 106 CMR 361.620). If all attempts to verify gross non-exempt income are unsuccessful because the person or organization providing the information has failed to cooperate, the worker must determine the household's gross monthly non-exempt income for certification based on the best available information.

(2) Alien Status. Verification of alien status is required prior to recertification only when the household reports a change in the alien status of the household member.

(3) Utility Expenses. Actual utility expenses higher than the standard allowance, claimed by a household entitled to use the standard, must be verified if use of actual utility expenses would result in a deduction. When the actual utility expenses cannot be verified in time to meet the recertification processing time standard, the standard allowance is used to determine the household's eligibility and benefit level. If the household subsequently verifies the actual utility expenses, the worker shall treat the information as a reported change. If the household is ineligible because the claimed but unverified utility expenses are disallowed, the worker shall begin action to terminate benefits by sending the household an advance notice of adverse action.

(4) Medical Expenses. The amount of allowable medical expenses, including the amount of reimbursement (e.g., by a third party insurer), must be verified prior to recertification if use of the expenses would actually result in a deduction. Additional verifications relevant to the claimed medical expenses, such as the allowability of service provided or the eligibility of the person incurring the cost, are not required unless the information provided by the applicant/recipient is questionable (see 106 CMR 361.620).

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(5) Social Security Numbers. If a household member's Social Security number was not verified at the time of the initial certification, it must be verified prior to or at the time of recertification, in accordance with the procedures in 106 CMR 362.520.

(6) Other Eligibility Factors. All other eligibility factors, financial or non-financial, are verified prior to recertification when the information provided by the applicant is questionable and affects the household's eligibility and benefit level. Other eligibility factors include loans, liquid resources, residency, student eligibility, household composition, citizenship, circumstances relative to work registration and certain deductible expenses.

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366.330: Department Responsibilities

When a household makes a timely application for participation subsequent to the initial period of certification, the worker must of the eligibility determination by the end of the current certification period.

(A) Scheduling Interviews. Except as provided in Section 366.320 (B), upon receipt of the Food Stamp Application the worker shall schedule a recertification interview. The worker shall not require a household to appear for an interview prior to the last month of its certification period or prior to the date the application is filed. However, an interview may be scheduled prior to that date provided the household is not denied for failing or refusing to appear for the interview.

(B) Time Standards for Providing Benefits to Eligible Households. Households which timely reapplied after having been given a Notice of Food Stamp Termination at the time of certification shall be notified of their eligibility or ineligibility and provided an opportunity to participate (if eligible) no later than 30 days after the household had opportunity to obtain its last Food Stamp allotment. All other households that timely recertify shall be provided with an opportunity to participate by their normal issuance date in the month following receipt of the application. Households which timely reapply but are not determined eligible in sufficient time to provide a machine issued ATP shall be issued an over-the-counter ATP on their normal issuance date. (See 106 CMR 364.910 (F)).

366.340: Failure to Recertify in a Timely Fashion

Any application for recertification not submitted in a timely fashion shall be treated as an application for initial certification. Additionally, a household which fails without good cause to: submit a timely application, or appear for an interview scheduled after a timely application was submitted, or provide required verification by the last day of its current certification period shall lose its right to uninterrupted benefits.

Households which file a timely application but refuse to complete the recertification process shall have their applications denied.

366.350: Good Cause for Failure to Timely Reapply

If the worker determines that the household's failure to make timely application or to complete the certification process in a timely manner was for good cause (such as illness or unplanned absence), the household shall be entitled to restoration of lost benefits, if as a result of its failure, the household was unable to participate in the month following the expiration of its certification period.

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application, be interviewed, and provide required information and verification in the month prior to the last month of the certification period. A household which complies with its responsibilities for recertification shall be provided advance notice of any action to reduce or terminate food stamp benefits and the opportunity for a pre-reduction or pre-termination appeal hearing.

366.340: Department Responsibilities

When a household makes timely application for participation subsequent to the initial period of certification and complies with its responsibilities for recertification, the worker must complete a timely recertification and send the household notice of the eligibility determination. A household which complies with its responsibilities for recertification shall be given proper and timely advance notice of any proposed action to reduce or terminate benefits.

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Households unable to participate in the Food Stamp Program in the month following the expiration of their certification period because of an error on the part of the Department shall be entitled to restoration of lost benefits.

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A household which moves into or out of Massachusetts shall have its certification continued for two months after the month of the move provided that:

- (A) The household membership has not changed and the household continued to meet the definition of a household, and
- (B) The household was not certified under Disaster Eligibility Standards; and
- (C) The household, if certified under expedited procedures, has provided all the verification that was initially postponed; and
- (D) The household does not contain an SSI recipient when moving into Wisconsin or California.

366.410: Responsibilities of the Former State

The certification office from which the household is moving shall prepare the form FNS-286, Certification of Transfer of Household Benefits. If the household has received its coupon allotment for the month in which the move takes place, the office shall authorize the extension of certification for the 2 months subsequent to the move. Form FNS-286 is given to the household for delivery to the new state.

366.420: Responsibilities of the New State

The worker shall accept an FNS-286 and issue the allotment authorized on the form to households which meet the requirements of section 400. The household shall report any changes in household circumstances at the time the FNS-286 is presented to the worker and the worker shall act on the reported change(s) in accordance with the timeliness standards contained in section 120.

- (A) If the household has participated in the former state in the month of the move and presents Form FNS-286 to the new certification office that same month, it shall be accepted and acted on in time for the next months issuance. The first monthly allotment will be based on the income reflected on Form FNS-286.
- (B) If the household has not participated in the former state in the month of the move and presents the FNS-286 to the new certification office that same month, the household will be provided an

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366.510: Entitlement

A household is entitled to lost benefits only for those months in which the household was eligible to participate. In cases where there is no information in the household's case record to document that the household was actually eligible, the worker shall advise the household of what information must be provided to determine eligibility for these months. For each month that the household cannot provide the necessary information to demonstrate its eligibility, the household shall be considered ineligible for restoration of lost benefits. The Department shall restore to the household benefits which were lost because of:

(A) an agency error, such as, an incorrect allotment, an incorrect denial or termination of benefits or agency delay in acting on a reported change; or

(B) a Department policy which specifically states a household is entitled to lost benefits; or

(C) a reversal of the fraud disqualification penalty of a household member; or

(D) a failure for good cause to make a timely recertification.

366.520: Computing the Amount to be Restored

(A) Months of Restoration. Except when benefits are restored as the result of the reversal of a fraud disqualification penalty, benefits shall not be restored more than 12 months prior to the most recent of the following:

- (1) the month the household or another person or agency notified the appropriate certification office verbally or in writing of the possible loss of benefits;
- (2) the month the worker discovered that a loss has occurred; or
- (3) the date the household requested a fair hearing to contest the adverse action which resulted in the loss.

(B) Computing the Amount to be Restored

- (1) If an incorrect allotment caused the loss to an eligible household, the loss of benefits shall be calculated only for those months the household participated. The worker shall calculate the allotment the household was eligible to receive during the months of entitlement. The amount to be restored is the difference between the actual allotment and the allotment the household was eligible to receive.

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366.400: 60 Day Continuation of Certification

A household which moves into or out of Massachusetts shall have its certification continued for two months after the month of the move provided that

- (A) The household membership has not changed and the household continues to meet the definition of a household, and
- (B) The household was not certified under Disaster Eligibility Standards; and
- (C) The household, if certified under expedited procedures, has provided all the verification that was initially postponed; and
- (D) The household does not contain an SSI recipient when moving into Massachusetts or Wisconsin.

366.410 Responsibilities of the Former State

The certification office from which the household is moving shall prepare the form FNS-286, Certification of Transfer of Household Benefits. If the household has received its coupon allotment for the month in which the move takes place, the office shall authorize the extension of certification for the 2 months subsequent to the move. Form FNS-286 is given to the household for delivery to the new state.

366.420: Responsibilities of the New State

The worker shall accept an FNS-286 and issue the allotment authorized on the form to households which meet the requirements of section 400. The household shall report any changes in household circumstances at the time the FNS-286 is presented to the worker and the worker shall act on the reported change(s) in accordance with the timeliness standards contained in section 120.

- (A) If the household has participated in the former state in the month of the move and presents Form FNS-286 to the new certification office that same month, it shall be accepted and acted on in time for the next month's issuance. The first monthly allotment will be based on the income reflected on Form FNS-286.
- (B) If the household has not participated in the former state in the month of the move and presents the FNS-286 to the new certification office that same month, the household will be provided an

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opportunity to participate in that month. The first issuance shall be based on the income reflected on the transfer form.

(C) A household which has zero net monthly income upon its arrival in the new state, shall have the option to reapply and receive expedited service in accordance with 106 CMR 365.800 through 890.

366.430: Rights of Households in the New State

Households participating on the basis of a Form FNS-286 shall be entitled to all procedural rights of any other food stamp household including Notice of Adverse Action on reported changes, and a Notice of Termination prior to the expiration of the second month of issuance authorized by the form FNS-286.

Households may elect to be re-certified in the new area at any time during their participation under the form FNS-286.

366.440: Households Which Move While Covered by Form FNS-286

Households which move to a new state during the 2 months covered by Form FNS-286 shall be issued either:

(A) a form FNS-286 for the balance of the period covered by the original form which reflects the changes reported at the time the form was accepted in the new project area; or

(B) a new form FNS-286 for an additional 2 months if the household was recertified and otherwise qualifies for another 60 day continuation of certification.

366.450: Certification of Households Moving Within the State

The Department shall provide for continuous service to certified households that move from one certification office to another within the state.

366.500 Restoration of Lost Benefits

The Department shall provide a system for Restoring Lost Benefits. Once a household's entitlement to Restoration of Lost Benefits is established, the amount due shall be restored to the household even if the household is currently ineligible.

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366.510: Entitlement

A household is entitled to lost benefits only for those months in which the household was eligible to participate. In cases where there is no information in the household's case record to document that the household was actually eligible, the worker shall advise the household of what information must be provided to determine eligibility for these months. For each month that the household cannot provide the necessary information to demonstrate its eligibility, the household shall be considered ineligible for restoration of lost benefits. The Department shall restore to the household benefits which were lost because of:

(A) an agency error, such as, an incorrect allotment, an incorrect denial or termination of benefits or agency delay in acting on a reported change; or

(B) a Department policy which specifically states a household is entitled to lost benefits; or

(C) a reversal of the fraud disqualification penalty of a household member; or

(D) a failure for good cause to make a timely recertification; or

(E) an error by the Department or by SSA through joint application processing. Such an error shall include, but is not limited to, the loss of an applicant's food stamp application after it has been filed with SSA.

366.520: Computing the Amount to be Restored

(A) Months of Restoration. Except when benefits are restored as the result of the reversal of a fraud disqualification penalty, benefits shall not be restored more than 12 months prior to the most recent of the following:

(1) the month the household or another person or agency notified the appropriate certification office verbally or in writing of the possible loss of benefits;

(2) the month the worker discovered that a loss has occurred; or

(3) the date the household requested a fair hearing to contest the adverse action which resulted in the loss.

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(B) Computing the Amount to be Restored

(1) If an incorrect allotment caused the loss to an eligible household, the loss of benefits shall be calculated only for those months the household participated. The worker shall calculate the allotment the household was eligible to receive during the months of entitlement. The amount to be restored is the difference between the actual allotment and the allotment the household was eligible to receive.

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(2) If an incorrect denial, delay or termination of benefits caused the loss, the months affected by the loss are calculated as follows:

- a. If an eligible household's application was erroneously denied, benefits will be restored back to the month of application. For an eligible household filing a timely reapplication, benefits shall be restored back to the month following the expiration of its certification period.
- b. If an eligible household's application was delayed, the months for which benefits will be restored shall be calculated in accordance with 106 CMR 361.900 through 361.960.
- c. If a household's benefits were erroneously terminated, benefits will be restored back to the first month in which benefits were not received as a result of the erroneous action.

After computing the date the loss initially occurred, the loss shall be calculated for each month subsequent to that date until either the first month the error is corrected or the first month the household is found ineligible.

366.530: Notification of Entitlement

When the worker determines that a loss of benefits occurred, s/he shall automatically take action to restore those benefits to the household. No action by the household is necessary. The household shall be notified of its entitlement, the amount of benefits to be restored, any offsetting that was done, the method of restoration and the right to appeal through the fair hearing process if the household disagrees with any aspect of the proposed lost benefit restoration.

366.540: Disputed Benefits

A household may request a fair hearing within 90 days of the date it is notified of the worker's decision regarding lost benefits.

(A) When a household does not agree with the amount to be restored or any other action taken by the Department to restore lost benefits and requests a fair hearing prior to or during the time lost benefits are being restored, the household shall receive the lost benefits in the amount determined by the worker, pending the results of the fair hearing. If the fair hearing decision is favorable to the household, the worker shall restore the lost benefits according to that decision.

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(B) If a household believes it is entitled to restoration of lost benefits, but the worker, after reviewing the case file, disagrees and informs the household in writing, the household has 90 days from the date of the worker's determination to request a fair hearing. If the household requests a Fair Hearing and the Fair Hearing decision is favorable to the household, the worker shall restore the benefits lost up to 12 months prior to the date the worker was initially informed of the household's possible entitlement to lost benefits.

366.550: Offsetting Claims

If a claim against a household is unpaid or held in suspense, the amount to be restored shall be offset against the amount due on the claim before the balance, if any, is restored to the household. At the point in time when the household is certified and receives an initial allotment, the initial allotment shall not be reduced to offset claims, even if the initial allotment is paid retroactively.

366.560: Individuals Disqualified for Fraud

Individuals disqualified for fraud are entitled to restoration of any benefits lost during the months they were disqualified only if the decision which resulted in disqualification is subsequently reversed. For example, an individual would not be entitled to restoration of lost benefits for the 3-month period it was disqualified, based solely on the fact that a criminal conviction could not be obtained, unless the individual successfully challenged the 3-month disqualification in a separate court action. For each month the individual was disqualified, the amount to be restored, if any, shall be determined by comparing the allotment the household received with the allotment the household would have received had the disqualified member been allowed to participate. If the household received a smaller allotment than it should have received, the difference equals the amount to be restored. Benefits shall be restored regardless of the length of time that has elapsed since the household member was disqualified.

366.570: Method of Restoration

Regardless of whether the household is currently eligible, the Department shall restore lost benefits to a household by issuing an allotment equal to the amount of benefits that were lost. For currently eligible households the lost benefits shall be issued in a lump sum separate from the household's current monthly allotment. However, the Department shall honor reasonable requests that the benefits be restored in monthly installments. For example, the

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household fears the excess coupons may be stolen, or the amount is more than the household can use in a reasonable time period, their request will be honored.

366.580: Changes in Household Composition

Whenever lost benefits are due a household and the household's membership has changed, the worker shall restore the lost benefits to the household containing a majority of the individuals who were household members at the time the loss occurred. If the worker cannot locate or determine the household which contains a majority of household members, the worker shall restore the lost benefits to the household containing the head of the household at the time the loss occurred.

366.590: Losses that Occurred Prior to the Elimination of the Purchase Requirement

Households assigned a purchase requirement that was too high or assigned an incorrect household size shall be entitled to restoration of lost benefits if the household received fewer bonus stamps as a result. The amount to be restored is equal to the difference between the bonus stamps the household received and the correct amount the household should have received. The Department shall restore the lost benefits in accordance with the procedures in sections 500 through 580.

366.600: Disaster Certification

The authority for the issuance of emergency food coupon allotments is granted in the Disaster Relief Act of 1974 and the Food Stamp Act of 1977.

The provisions of this section cannot be used without the specific authorization of the Food and Nutrition Service of the U.S. Department of Agriculture following a declaration by the President of a major disaster and other disaster periods declared by Food and Nutrition Service. The authorization by FNS will specify the disaster area and the period for which an over-the-counter zero purchase ATP for eligible households may be given. That authorization must be officially communicated to the CSAO/WSO by the Central Office of the Massachusetts Department of Public Welfare. Only then can these provisions be used.

366.610: Introduction

The Emergency Food Stamp Assistance in Disaster Program is

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specifically designed to provide immediate relief to all people in need of food assistance because of a disaster situation. Eligibility will be based on a self-declaration application. No additional data will be required to determine eligibility, but the statements of the applicant may be subject to review and verification by Quality Control. Households certified under the disaster eligibility standards shall be provided an ATP for the maximum coupon allotment for the household size.

366.620: Eligibility and Certification

Due to emergency conditions, it is possible that more than one family will occupy a dwelling. Therefore, applicant groups or individuals sharing common living quarters may be certified as separate households. The following eligibility requirements must be met for certification of households under the provisions of Emergency Food Stamp Assistance in Disaster. No other eligibility requirements will be imposed.

(A) Eligibility Requirements.

(1) The household will be eligible for Emergency Food Stamp Assistance in Disaster only once during the time period authorized by FNS. If a new period is authorized by FNS, the household must reapply. No emergency food coupon allotment shall be authorized or issued after the expiration of the authorized period. Previous authorized participation in the ongoing Food Stamp Program, even when the household has already purchased food coupons during the month in which the disaster occurs, shall not preclude a second issuance in accordance with these procedures. A second issuance shall be made if it appears that due to the disaster the household is unable to make the previously authorized purchase or has lost previously purchased coupons or has lost stocks of food acquired through the use of food coupons and meets the other eligibility requirements.

(2) The household resides either temporarily or permanently within the geographical limits of the disaster area as specified by FNS.

(3) The household is in need of food stamp assistance because of a reduction in or inaccessibility of income or cash.

(B) Certification Procedures.

(1) The household must complete and have the head of the household, or spouse, or authorized representative sign FSP-16. That is the application form for Emergency Food Stamp Assistance in Disaster as well as the request for an ATP for the maximum coupon allotment to the household size.

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(2) The worker reviews the application to determine if the applicant's statements meet the eligibility requirements of Emergency Food Stamp Assistance in Disaster.

(3) When the household fails to meet the disaster eligibility requirements, they must be given Notice of Denial and be advised that they may apply for food stamp assistance in accordance with ongoing program requirements.

(4) When the household is determined to be eligible:

- a. They must be given a Food Stamp Identification Card.
- b. They must be given an ATP card over-the-counter for the maximum coupon allotment for the household size for the period authorized by FNS (one-half or whole month).
- c. They must be given a Notice of Approval which informs them where stamps may be purchased, proper use of coupons, and that the benefit is only for the specified period. Further benefits can be given only as the result of an approval of a new application for a later time period. (If FNS extends the disaster period, the household will have to make a new application for further benefits.)

366.700: Retroactive Policy Changes Under the Aiken Court Order

The court order issued in Aiken v. USDA mandated certain policy changes and required that these changes be made retroactive to August 5, 1974. The effect of these changes is that maximum allotment households that applied for certification pending verification between August 5, 1974 and May 1, 1978 may now be eligible for past benefits. These retroactive policy changes are:

- (A) Elimination of the collateral contact requirement for certification pending verification.
- (B) Elimination of the provision that certification pending verification be allowed only once in a six month period.
- (C) Elimination of the "little or no liquid resource" requirement.

366.710: Definitions

(A) Past Benefits. Under the Aiken court order, past benefits are food stamps owed to an applicant household because the food stamps were delayed or never received due to eligibility requirements eliminated by the Aiken court order.

(B) Delayed Benefits. Delayed benefits are food stamps not received by an applicant household in the same calendar month in which the household

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applied.

(C) Never Received Benefits. Never received benefits are food stamps an applicant household did not receive because

(1) the application was denied due to collateral contact requirement or because the household had already received certification pending verification once in a six month period, or

(2) the household did not apply for food stamps because of the collateral contact requirement or because they had already received certification pending verification once in a six month period.

366.720: Application for Past Benefits - Household Responsibilities

To apply for past benefits the household must do the following.

(A) Request the benefits (orally or in writing) at the CSAO/WSO that covers the area in which the household currently resides.

(B) Complete and sign a separate application for each month in which past benefits are requested, and

(C) Provide verification of income for each month for which the household is applying or sign a statement under penalty of perjury or false swearing as to the validity of the facts presented on the application.

366.730: Application for Past Benefits - Department Responsibilities

To process applications for past benefits the Department must do the following:

(A) Eligibility Determination. Each month for which benefits are requested must be considered independently. Eligibility must be determined within (30) days of the date the applicant provides verification of income or signs the statement in place of verification.

(B) Timely Notification. The worker must notify the household of approval or denial by the thirtieth day following the date of application.

(C) Prompt Issuance. Past benefits shall be issued promptly to eligible households in accordance with established procedures.

(D) Fair Hearings. The household has the right to a fair hearing if benefits are denied under this policy.

366.800: Claim Determinations Against Households

A claim shall be established against any household that has received more food stamp benefits than it is entitled to receive. Instances which may result in a claim include the following:

- (A) The household failed to provide correct or complete information.
- (B) The household failed to report changes in its household circumstances.
- (C) The household altered its ATP.
- (D) The household transacted both the original and the replacement ATP.

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STANDARD UTILITY ALLOWANCE

FIRST MONTH OF CERTIFICATION	NUMBER OF MONTHS THAT HOUSEHOLD IS CERTIFIED											
	1	2	3	4	5	6	7	8	9	10	11	12
JANUARY	299	257	238	207	182	172	144	131	123	124	130	143
FEBRUARY	214	207	176	153	132	117	108	101	104	112	127	143
MARCH	201	158	132	111	97	89	85	90	101	119	136	143
APRIL	115	97	81	72	67	66	74	89	110	129	137	143
MAY	80	65	58	56	56	68	86	110	131	139	145	143
JUNE	49	47	47	50	65	86	114	137	146	151	147	143
JULY	45	46	50	69	94	125	149	157	162	158	151	143
AUGUST	47	52	78	105	140	167	174	177	170	161	150	143
SEPTEMBER	57	93	125	163	191	195	196	185	174	161	151	143
OCTOBER	129	160	200	225	223	219	204	189	173	160	149	143
NOVEMBER	190	235	256	246	236	217	197	178	163	152	144	143
DECEMBER	279	290	264	248	221	198	176	160	147	139	138	143

INSTRUCTIONS FOR TABLE USE

1. Find the first month of the certification period in the first column.
2. Read across until you find the dollar figure for the number of months in the certification period. This dollar figure is the standard utility allowance.
3. Add this dollar figure to other shelter expenses to arrive at total shelter expenses.

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(E) The household was found to be ineligible or eligible for fewer benefits than it received pending a fair hearing decision.

(F) The Department failed to take prompt action on a change reported by the household.

(G) The Department incorrectly computed the household's income or deductions or otherwise assigned an incorrect allotment.

(H) The Department incorrectly issued duplicate ATP's to a household and the household transacted both ATP's.

366.810: Nonfraud Claims

A claim for overissuance is a nonfraud claim if the overissuance was not caused by fraud. These claims include, but not limited to overissuances caused by administrative error on the part of the Department or a misunderstanding or inadvertent error on the part of the household.

(A) Establishing a Non-Fraud Claim. A non-fraud claim shall be established against a household only for overissuances which occurred less than twelve (12) months prior to the date the overissuance was discovered. A non-fraud claim shall not be established if the overissuance was the result of the following errors:

- (1) The Department failed to insure that the household fulfilled the procedural requirements of signing the application form or completing a current work registration form.
- (2) A household continued to receive food stamp benefits after its certification period expired when a recertification was not completed regardless of whether the household was subsequently determined eligible or ineligible.
- (3) A household transacted an expired ATP, unless the household altered its ATP; or
- (4) The Department failed to reduce food stamp benefits when household's cash assistance grant was changed.

(B) Calculating the Amount of the Non-Fraud Claim. After excluding those months that are more than 12 months prior to the date the overissuance was discovered, the worker shall determine the correct amount of food stamp benefits the household should have received for those months the household participated while the overissuance was in effect. In cases involving reported changes, the worker shall determine the month the overissuance occurred as follows:

- (1) If, due to a misunderstanding or inadvertent error on the

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part of the household, a household failed to report a change in its household circumstances within 10 days of the date the change became known to the household, the first month affected by the household's failure to report shall be the month after the month in which the change occurred.

(2) If the household timely reported a change, but the Department did not timely act on the change, the first month of overissuance shall be the first month the worker should have made the change effective. Therefore, if a Notice of Adverse Action was required but was not sent, the worker shall assume that the maximum advance notice period would have expired without the household requesting a fair hearing.

(3) If the household received a larger allotment than it was entitled to receive, the worker shall establish a claim against the household equal to the difference between the allotment the household received and the allotment the household should have received.

(4) After calculating the amount of the overissuance the worker shall forward all claims over \$35 to the Central Claim Collection Unit for collection action. The worker shall inform the Central Claim Collection Unit if the household is entitled to Restoration of Lost Benefits.

(C) Collection of Non-Fraud Claims. The Claim Collection Unit shall offset the amount of the non-fraud overissuance by deducting the amount of any Lost Benefit owed to the household. Collection action shall be initiated by sending the household the written demand letter unless the household cannot be located. If the household pays the claim, payments shall be accepted and submitted in accordance with the procedures for collecting claims. If the household does not respond to the first demand letter, additional demand letters shall be sent at reasonable intervals, such as 30 days, until the household has responded by paying or agreeing to pay the claim, or the claim has been totally offset by lost benefits owed to the household, or until the criteria for suspending collection have been met.

(D) Suspending Collection of Non-Fraud Claim. If at least one demand letter has been sent to the household, further collection shall be suspended when:

- (1) The household is financially unable to pay the claim;
- (2) There is little likelihood that the household will pay the claim.
- (3) The household cannot now be located; or
- (4) The cost of further collection action is likely to exceed the amount that can be recovered.

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(E) Terminating Collection of Non-Fraud Claims. A claim shall be determined uncollectible and terminated after three years in a suspended status.

(F) Postponing Collection of Non-Fraud Claims. Collection of a non-fraud claim shall be postponed when the household is being referred for possible prosecution or for an administrative fraud hearing.

366:820: Fraud Claims

A claim for overissuance is a fraud claim only if an administrative fraud hearing or a court of appropriate jurisdiction has found a household member committed fraud.

(A) Calculating the Amount of a Fraud Claim. For each month that a household member fraudulently participated, the worker shall determine the correct amount of food stamp benefits, if any, the household was entitled to receive. The amount of the fraud claim shall be calculated back to the month the fraudulent act occurred, regardless of the length of time that elapsed until the determination of fraud was made. If the household member is determined to have committed fraud by knowingly, willfully, and with deceitful intent failing to report a change in its household circumstances the first month benefits were overissued shall be the month after the month in which the change occurred.

(B) Collection of Fraud Claims. If the household member is found to have committed fraud at either an administrative fraud hearing, or a court of appropriate jurisdiction, the Department shall initiate collection action unless the Department has documentation which shows the household cannot be located, or the legal representative prosecuting a member of the household for fraud advises in writing that collection action will prejudice the case. In cases where the household was found guilty of fraud by a court, the matter of restitution shall be brought before the court by the Department. The Claim Collection Unit shall offset any fraudulently obtained overissuances by deducting any lost benefits owed to the household.

(1) Collection action shall be taken by sending the household the written fraud claim demand letter. In addition to the written demand letter a personal contact shall be made, if possible.

(2) If the household agrees to pay the claim after the first demand letter, the procedures for collecting and submitting pay-

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ments shall be followed. If the household does not respond to the first demand letter, additional demand letters shall be sent at reasonable intervals such as 30 days, until the household agrees to pay the claim, the claim has been offset by lost benefits owed to the household, or the criteria for suspending or terminating collection action has been met.

(C) Suspending Collection of a Fraud Claim. Collection action shall be suspended at any time there is documentation that the household cannot be located. For households must be sent at least one demand letter for fraud claims under \$100, at least two demand letters for fraud claims between \$100 and \$400, and at least three demand letters for fraud claims of more than \$400. Further collection shall be suspended when the following occurs.

- (1) The household is financially unable to pay the claim,
- (2) There is little likelihood that the Department can collect or enforce collection of any significant sum from the household,

- (3) The cost of further collection action is likely to exceed the amount that can be recovered.

(D) Terminating Collection of a Fraud Claim. A claim shall be determined uncollectible and terminated after 3 years in a suspended status.

(E) Changes in Household Composition. If a household's membership has changed since the overissuance occurred, collection action shall be initiated against the head of the household. If the head of the household is no longer living or cannot be located, collection action shall be initiated against the household containing a majority of the individuals who were household members at the time the fraudulently obtained overissuance occurred.

366.830: Method of Collecting Fraud and Non-Fraud Payments

Payments on fraud and non-fraud claims shall be collected in one of the following ways.

- (A) In one lump sum, if the household is financially able to make a lump sum payment.

- (B) In regular installments if the household has insufficient liquid resources or is otherwise financially unable to pay the claim in one lump sum.

If the full amount of the claim cannot be liquidated in 3 years without creating a financial hardship on the household, the Department shall compromise the claim by reducing it to an amount that

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will allow the household to pay the claim in 3 years.

The amount of the claim shall be offset by any lost benefits which are owed to a household until the time the claim is terminated. Civil court action may be initiated to obtain payment of the claim. However, the Department shall not deny, terminate or reduce a household's benefits for failure to repay a claim, to agree to a repayment schedule, or to make the agreed upon payments. Nor shall the Department threaten the household with a denial, termination or reduction in benefits or otherwise infer that it has the power to take such action.

366.840: Claims Discharged Through Bankruptcy

The Department shall act on behalf of, and as, FNS, in any bankruptcy proceedings against bankrupt households owing food stamp claims. The Department shall possess any rights, priorities, interests liens or privileges, and shall participate in any distributions of assets, to the same extent as FNS. Acting as FNS, the Department shall have the power and authority to file objections to discharge, proofs of claims, exceptions to discharge petitions for revocation of discharge, and any other documents, motions or objections which FNS might have filed. Any amounts collected under this authority shall be transmitted to FNS.

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366.900: SSI Cash-In

As of 10/1/81 Massachusetts is no longer designated as a cash-out State. On that date SSI recipients residing in Massachusetts are no longer classified as ineligible households and non-household members for food stamp purposes.

In order to facilitate the cash-in process, the United States Department of Agriculture has granted waivers to certain standard policy items. The revised policy items, resulting from these waivers, apply only to food stamp households containing SSI recipient(s) and differ depending on whether the household is handled by the SSI Demonstration Unit or the local CSAO/WSO. The waivers apply only to the policy items addressed and for the specific length of time indicated.

366.910: SSI Recipients Serviced by Local Offices

SSI recipients who do not meet the SSI Demonstration Unit select criteria shall be serviced by local CSAO/WSO's. The following policy items shall apply to these SSI households from 10/1/81 to 12/31/81.

(A) Date of Application. Identifiable applications returned to appropriate CSAO/WSO's as a result of a mass mailing in September 1981 to SSI recipients shall be considered to be received on 10/1/81, if received prior to this date.

(B) Interviewing Households. At the time of initial certification an interview will be conducted only if the information provided by the applicant is incomplete or questionable in accordance with 106 CMR 361.620.

(C) Alien Status. SSI recipients who are not U.S. citizens shall be regarded as eligible aliens for food stamp purposes.

(D) Certification Periods. At initial certification, unemployable SSI households with stable income will be randomly assigned certification periods of varying lengths in order to stagger recertifications. In no case shall the certification period be less than six months or more than twelve months.

(E) Verification at Initial Certification. SDX data will be used to verify the identity, residency, Social Security number(s), RSDI and SSI income of the SSI recipient. Additional verification of these eligibility factors will be required only if this information contradicts information supplied by the SSI recipient.



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366.920: SSI Demonstration Unit

SSI recipients who meet certain select criteria as determined by the Department shall, as long as they continue to meet these criteria, be part of a federally approved demonstration project. This project shall commence 10/1/81 and end 9/30/82.

The following revised policy, in effect from 10/1/81 to 9/30/82, applies to SSI households serviced by the SSI Demonstration Unit.

(A) Date of Application. The date of application shall be the date an identifiable application is received by the Central SSI Demonstration Unit unless the application is received prior to 10/1/81. Applications received prior to that date shall be considered to have been received on 10/1/81.

(B) Filing an Application. Applications/recertifications may not be filed in person at the SSI Demonstration Unit. Assistance in completing applications will be available at local CSAO/WSO's.

(C) Interviewing Households. Interviews at the time of application/recertification will only be conducted if the information provided by the applicant/recipient is incomplete or questionable. Interviews will be by phone or mail and will, in most instances, address only the questionable information.

(D) Verification at Initial Certification

(1) SDX data will be used to verify the income, resources, identity, residency, Social Security number(s), and alien status of the SSI recipient. Additional verification of these eligibility factors will be required only if the information supplied by the SSI recipient contradicts SDX data.

(2) Deductible expenses claimed by the applicant shall be verified only if the amount claimed is questionable and the deduction affects the household's eligibility or benefit level.

(E) Anticipating Income. At certification/recertification income listed on the SDX file shall be regarded as the income anticipated to be received during the certification period.



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(F) Certification Periods. At initial certification, eligible households will be randomly assigned certification periods of varying lengths in order to stagger recertifications. In no case shall the certification period be less than six months or more than twelve months.

(G) Resource Eligibility - Initial Certification. SSI recipients shall be regarded as resource eligible at initial certification.

(H) Documentary Evidence. SDX files shall serve as documentary evidence of the items listed in (D) (1) above.

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The Department shall provide a fair hearing to any household that is dissatisfied with any Department action or inaction that affects participation in the Food Stamp Program.

367.050: Notification of Right to Request Hearing

At the time of application, each household shall be informed in writing of its right to a hearing, of the method by which a hearing may be requested, and that its case may be presented by a household member or an authorized representative, such as a legal counsel, a relative, a friend or other spokesperson. In addition, at any time the household expresses to the Department that it disagrees with the Department action, it shall be reminded of the right to request a fair hearing. If there is an individual or organization available that provides free legal representation, the household shall also be informed of the availability of that service. A copy of the hearing procedures shall be made available to any interested party upon request.

367.075: Consolidated Hearings

The Department may respond to a series of individual requests for hearings by conducting a single group hearing. The Department may consolidate only cases where the sole issue is one of State and/or Federal law, regulations or policy and individual issues of fact are not disputed. In all group hearings, the regulations governing individual hearings must be followed. Each individual household shall be permitted to present its own case or have the case presented by a representative.

367.100: Time Period for Requesting Hearing

A household shall be allowed to request a hearing on any action by the Department, or on loss of benefits which occurred in the prior 90 days. Action by the Department includes a denial of a request for restoration of any benefits lost more than 90 days but less than one year prior to the request. In addition, at any time within a certification period a household may request a fair hearing to dispute its current level of benefits.

367.125: Request for Hearing

A request for a hearing is defined as a clear expression, oral or written, by the household or its representative to the effect that it wishes to appeal a decision or that an opportunity to present its case to a higher authority is desired. If it is unclear from the household request what action it wishes to appeal, the Department may request the household to clarify its grievance. The freedom to make a request for a hearing shall not be limited or interfered with in any way.

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367.150: Assistance from the Department

(A) The Department shall:

- (1) Assist the household in filing an appeal. If a household makes an oral request for a hearing, an eligibility worker will provide the household with an appeal form and assistance in completing the form if such help is requested.
- (2) Advise household of any available legal services which can provide representation at the hearing.
- (3) Upon request, make available without charge a copy of materials necessary for a household or its representative to determine whether to file an appeal or to prepare for the hearing. In accordance with 106 CMR 360.400 confidential information shall not be released to the household for review.
- (4) Provide an interpreter to explain the hearing procedures if the party requesting a hearing does not speak English and resides in an area where the Department is required to provide bilingual staff or interpreters in accordance with FNS regulations.
- (5) Provide any interested party with a copy of the rules of procedures governing Fair Hearings.

367.175: Denial or Dismissal of Request for Hearing

- (A) The Department shall deny or dismiss a request for a hearing when:
- (1) The request is not received within the time specified in 367.100.
 - (2) The request is withdrawn in writing by the household or its representative; or
 - (3) The household or its representative fails, without good cause, to appear at a scheduled hearing.

367.200: Household Request for Postponement

The household may request and is entitled to receive a postponement of the scheduled hearing. The postponement shall not exceed 30 days and the time limit for action on the decision as specified in 367.450 may be extended for as many days as the hearing is postponed. For example, if a hearing is postponed by the household for 10 days, notification of the hearing decision will be required within 70 days from the date of the request for a hearing.

367.225: Agency Conferences

- (A) The Department shall offer agency conferences to households who wish to contest a denial of expedited service. The Department shall advise households that use of an agency conference is optional and that it shall in no way delay or replace the fair hearing process. The Agency conference may be attended by the eligibility worker responsible for the Department action and shall be attended by an eligibility supervisor and/or the CSA/WSO Director, and by the house-

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hold and/or its representative. Failure of the household to attend the agency conference shall not be cause to reduce or terminate benefits. An agency conference may lead to an informal resolution of the dispute. However, a fair hearing must be held unless the household makes a written withdrawal of its request for a hearing.

(B) Time Frame for Agency Conferences Regarding Expedited Service

An agency conference for households contesting a denial of expedited service shall be scheduled within two working days, unless the household requests that it be scheduled later.

367.250: Expedited Hearings

The Department shall expedite hearing requests from households such as migrant farmworkers who plan to move from the jurisdiction of the hearing official before the hearing decision would normally be reached. Hearing requests from these households shall be processed faster than others if necessary to enable them to receive a decision and a restoration of benefits, if the decision so indicates, before they leave the area.

367.275: Continuation of Benefits

If a household requests a fair hearing within the period provided by the Notice of Adverse Action, and its certification period has not expired, the household participation in the program shall continue on the basis authorized immediately prior to the Notice of Adverse Action unless the household specifically waives continuation of benefits. The form for requesting a fair hearing shall contain space for the household to indicate whether or not continued benefits are requested. If the form does not positively indicate that the household has waived continuation of benefits, the Department shall assume that continuation of benefits is desired and the benefits shall be issued accordingly. If the Department action is upheld by the hearing decision, a claim against the household shall be established for all overissuances. If a hearing request is not made within the period provided by the Notice of Adverse Action, benefits shall be reduced or terminated as provided in the notice. However, if the household establishes that its failure to make the request within the advance notice period was for good cause, the eligibility worker shall reinstate the benefits to the prior basis. When benefits are reduced or terminated due to a mass change, participation on the prior basis shall be reinstated only if the issue being contested is that food stamp eligibility or benefits were improperly computed or that Federal law or regulations are being misapplied or misinterpreted by the Department.

367.300: Reduction or Termination of Benefits

(A) Once continued or reinstated, benefits shall not be reduced or

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terminated prior to receipt of the official hearing decision unless one of the following occurs:

(1) Issue of Federal Law or Regulation

The hearing official makes a preliminary determination, in writing at the hearing, that the sole issue is one of Federal law or regulation and that the household claim that the Department improperly computed the benefits or misinterpreted or misapplied such law or regulation is invalid.

(2) Change in Household Eligibility or Benefit Level

A change affecting the household's eligibility or basis of issuance occurs while the hearing decision is pending and the household fails to request a hearing after the subsequent Notice of Adverse Action.

(3) Mass Change

A mass change affecting the household eligibility or basis of issuance occurs while the hearing decision is pending.

(4) Certification Period Expires

The household's certification period expires.

367.325: Notification of Hearing

(A) The time, date, and place of the hearing shall be arranged so that the hearing is accessible to the household. In order to permit adequate preparation of the case, at least 10 days prior to the hearing, advance written notice shall be provided to all parties involved. However, the household or its representative may request less advance notice to expedite the scheduling of the hearing. The notice shall contain the following:

(1) Contact Person in the Division of Hearings

The name, address, and phone number of the person to notify in the event it is not possible for the household to attend the scheduled hearing.

(2) Dismissal of Appeal for Failure to Appear

A statement to the household indicating that the Department will dismiss the hearing request if the household or its representative fails to appear for the hearing without good cause.

(3) Fair Hearing Procedures

An explanation of the Department hearing procedures and any other information which will provide the household with an understanding of the proceedings and contribute to the effective presentation of the household case.

(4) The Right to Examine the Case File

A statement that the household or representative may examine the case file prior to the hearing.

367.350: Attendance at Hearing

The hearing shall be attended by a representative of the Department and by the household and/or its representative. The hearing may also be attended by friends or relatives of the household if the household so chooses. The hearing official shall have the authority to limit the number of persons in attendance at the hearing if space is limited.

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367.375: Hearing Official

(A) The person designated by the Department to preside over the hearing shall be the hearing official. The hearing official shall be an impartial party who does not have any personal stake or involvement in the case and who was not directly involved in the initial determination of the action which is being contested.

(B) Powers and Duties of the Hearing Official

The hearing official shall have the following powers and duties:

(1) Administer Oath

The hearing official shall administer oaths.

(2) Ensure Consideration of Issues

The hearing official shall ensure that all relevant issues are considered.

(3) Record Evidence

The hearing official shall request, receive and make part of the record all evidence determined necessary to decide the issues being raised.

(4) Regulate the Conduct of the Hearing

The official shall regulate the conduct and course of the hearing consistent with due process to ensure an orderly hearing.

(5) Order Medical or Professional Evaluations

The hearing official shall order, where relevant and useful, an independent medical assessment or professional evaluation from a source mutually satisfactory to the household and the Department. The medical evaluation will be at the expense of the Department.

(6) Render a Hearing Decision

The hearing official shall provide a record and render a hearing decision in the name of the Department.

367.400: Household Rights During Hearing

(A) The household may not be familiar with the rules of order and it may be necessary to make particular efforts to arrive at the facts of the case in a way that makes the household feel most at ease. The household or its representative must be given adequate opportunity to:

(1) Examine all documents and records to be used at the hearing at a reasonable time before the date of the hearing as well as during the hearing. The contents of the case file including the application form and documents of verification used by the Department to establish the household's ineligibility or eligibility and allotment shall be made available, provided that confidential information, such as the names of individuals who have disclosed information about the household without its knowledge or the nature or status of pending criminal prosecutions, is protected from release. If requested by the household or its representative,

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the Department shall provide a free copy of portions of the case file that are relevant to the hearing. Confidential information protected from release and other documents or records which the household will not otherwise have an opportunity to contest or challenge shall not be introduced at the hearing or affect the hearing official's decision.

(2) Present the case or have it presented by a legal counsel or other person.

(3) Bring witnesses.

(4) Advance arguments without undue interference.

(5) Question or refute any testimony or evidence, including an opportunity to confront and cross-examine adverse witnesses.

(6) Submit evidence to establish all pertinent facts and circumstances in the case.

367.425: The Appeal Decision

(A) Decisions of the hearing authority shall comply with Department policy and shall be based on the hearing record. The verbatim transcript or recording of testimony and exhibits, or an official report containing the substance of what transpired at the hearing, together with all papers and request filed in the proceeding, shall be retained in accordance with Department policy and shall constitute the exclusive record for the final decision of the hearing official. The record will be available for copying and inspection by the household or its representative during normal office hours.

(B) Effect and Content of the Hearing Decision

A decision by the hearing authority shall be binding on the Department and shall summarize the facts of the case, specify the reasons for the decision, and identify the supporting evidence and the pertinent Department policy. The decision shall become a part of the hearing record.

(C) Issuance of the Hearing Decision

The household and the CSA/WSO shall be sent a copy of the decision, be advised of the right to judicial review where the Department action is upheld, and that the household benefits will be issued or terminated as decided by the hearing authority.

367.450: Time Period for Rendering and Implementing Decision

(A) Within 60 days of receipt of a request for a fair hearing, the Department shall conduct the hearing, arrive at a decision, and notify the household and the CSA/WSO of the decision.

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(1) Decision in Favor of the Household

When the hearing official determines that a household has been improperly denied program benefits or has been issued a lesser allotment than was due, lost benefits shall be provided in accordance with 106 CMR 366.500. Decisions which result in an increase in household benefits shall be reflected in the monthly allotment within 10 days of the receipt of the decision. The Department may take longer than the 10 days if it elects to make the decision effective in the normal issuance cycle, provided that the issuance will occur within 60 days from the household request for the hearing. The Department shall restore benefits to households who are leaving the state before the departure if possible. If benefits are not restored before departure the office from which the household has moved shall prepare the form FNS-286 Certification of Transfer of Household Benefits and forward this with a copy of the hearing decision to the new office or to the household.

(2) Decision Against the Household

Decisions which result in a decrease in the household benefits shall be reflected in the next scheduled issuance following receipt of the fair hearing decision. When the hearing official upholds the Department action, a claim against the household for any over-issuance shall be prepared in accordance with Department policy.

367.475: Judicial Review

When the hearing official upholds the Department action, the household shall be notified of the right to pursue judicial review of the decision.

367.485: Compilation of Fair Hearing Decisions

All Department hearing records and decisions shall be available for public inspection and copying, subject to disclosure safeguards provided in 106 CMR 360.400 and provided identifying names and addresses of household members and other members of the public are kept confidential.

(106 CMR 367.486 through 367.499 Reserved)

367.500: Introduction to Administrative Fraud Hearings

The Department is required to implement administrative fraud disqualification procedures and must have a system established for conducting fraud hearings.

367.525: Definition of Fraud

For purposes of determining at an administrative fraud hearing whether or not fraud was committed, fraud includes any action by an individual to knowingly, willfully and with deceitful intent:

THE UNIVERSITY OF CHICAGO
DEPARTMENT OF CHEMISTRY
JANUARY 1950

TO THE HONORABLE CHAIRMAN OF THE BOARD OF TRUSTEES
OF THE UNIVERSITY OF CHICAGO
FROM THE DEPARTMENT OF CHEMISTRY
SUBJECT: REPORT ON THE PROGRESS OF RESEARCH
DURING THE YEAR 1949

The following report summarizes the work done in the Department of Chemistry during the year 1949. It is divided into two main parts: a general summary of the work done in the department and a detailed account of the work done in the various laboratories.

The general summary of the work done in the department is given in the first part of the report. It includes a list of the principal results achieved during the year and a brief description of the methods used to obtain them.

The detailed account of the work done in the various laboratories is given in the second part of the report. It is divided into sections corresponding to the different laboratories and includes a description of the work done in each of them.

The work done in the Department of Chemistry during the year 1949 has been very productive. It has resulted in the discovery of several new compounds and the development of several new methods of synthesis. It has also resulted in the publication of several papers in the field of organic chemistry.

The work done in the Department of Chemistry during the year 1949 has been very productive. It has resulted in the discovery of several new compounds and the development of several new methods of synthesis. It has also resulted in the publication of several papers in the field of organic chemistry.

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- (1) Make a false statement to the Department, either orally or in writing, to obtain benefits to which the household is not entitled;
- (2) Conceal information to obtain benefits to which the household is not entitled;
- (3) Alter ATP's to obtain benefits to which the household is not entitled;
- (4) Use coupons to buy non-food items such as alcohol or tobacco;
- (5) Use or possess improperly obtained coupons or authorization cards; or
- (6) Trade or sell coupons or ATP's to someone not authorized to accept them and who does not use them entirely for the benefit of the household.

367.550: Fraud Disqualification Penalties

Individuals found to have committed fraud by the hearing official shall be ineligible to participate in the Program for three months. Individuals found guilty of criminal or civil fraud by a court of appropriate jurisdiction shall be ineligible for not less than six months and not more than twenty-four months as determined by the court. The Department shall disqualify only the individual and not the entire household.

367.575: Warning to Applicants

The Department shall inform the household in writing of the disqualification penalties for committing fraud each time it applies for program benefits. The penalties shall be written in clear, prominent, and boldface lettering on the application form.

367.600: Administrative Disqualification

An administrative fraud hearing shall be initiated by the CSA/WSO whenever the Department has documented evidence to substantiate that a currently certified household member has committed fraud as defined in Section 367.525. Fraud hearings shall not be conducted if the amount the Department alleges has been fraudulently obtained is less than \$35 or if the value of the ineligible items that have been purchased with food stamps is under \$35. The burden of proving fraud is on the Department. If the household member is not certified when the suspected fraud is discovered, the Department shall initiate the hearing when the household member becomes certified. Even though other legal action is planned against the household member, the hearing may still be conducted.

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The Department may combine a fair hearing and an administrative fraud hearing into a single hearing if the factual issues arise out of the same, or related circumstances and the household receives prior notice that the hearings will be combined. The timeliness standards for conducting fraud hearings shall be followed.

367.650: Applicability of Fair Hearing Procedures

The provisions of 106 CMR Sections 367.350, 367.375, 367.400 and 367.425 (A) are also applicable to fraud hearings. Further, the hearing official shall advise the household member or representative that they may refuse to answer questions during the fraud hearing.

367.675: Advance Notice of Hearing

(A) The Department shall provide written notice to the household member suspected of fraud at least 30 days in advance of the hearing. The notice shall be mailed Certified Mail - Return Receipt Requested and shall contain:

- (1) The date, time, and place of the hearing;
- (2) The charge against the household member;
- (3) A summary of the evidence, and how and where it can be examined;
- (4) A warning that the decision will be based solely on information provided by the food stamp office if the household member fails to appear at the hearing;
- (5) A warning that a determination of fraud will result in a three month disqualification;
- (6) A listing of the household member's rights as contained in 367.400;
- (7) A copy of the Department hearing procedures (attached to the advance notice);
- (8) A statement that the household can call the food stamp office to get the name and telephone number of someone who can provide free legal advice. If free legal advice is not available, the food stamp office when called shall provide the telephone number of a lawyer referral service of the local bar association.
- (9) A statement that the hearing does not preclude the State or Federal Government from prosecuting the household member for fraud in a civil or criminal court action, or from collecting the overissuance.

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367.700: Scheduling of the Hearing

Reasonable efforts shall be made to schedule the hearing at a time and place convenient to the household member suspected of fraud. If the household member or his or her representative cannot be located or fails to appear at the hearing without good cause, the hearing shall be conducted. Even though the household member or authorized representative is not present, the hearing official is required to carefully consider the evidence and determine if fraud was committed based on clear and convincing evidence. If the household member is found to have committed fraud but a hearing official later determines that the household member or representative failed to appear with good cause, the previous decision shall no longer remain valid and the Department shall conduct a new hearing. The hearing official who originally ruled on the case may conduct the new hearing. The household member has 10 days from receipt of the fraud decision to present reasons indicating good cause for failure to appear.

367.725: Participation While Awaiting a Hearing

Since the Department cannot disqualify a household member for fraud until the hearing official finds that the individual has committed fraud, the CSA/WSO worker shall continue to determine the eligibility and benefit level of the household in the same manner it would be determined for any other household. For example, if the action for which the household member is suspected of fraud does not affect the household's current circumstances, the household would continue to receive its allotment based on the latest certification action or be recertified based on a new application and its current circumstances. However, the household's benefits shall be terminated if the certification period has expired and the household, after receiving its Notice of Termination, fails to re-apply. Benefits shall be reduced or terminated if the worker can substantiate that the household is ineligible (or is eligible for fewer food stamp benefits) and the household fails to file a timely request for a fair hearing after receiving a Notice of Adverse Action. For example, if the worker can substantiate that an unreported change occurred in the household circumstances, s/he shall begin action to reduce or terminate benefits even though the Department has not yet demonstrated that the household failure to report the change was caused by fraud.

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The hearing authority shall base the determination of fraud on clear and convincing evidence which demonstrates that the household member willfully, knowingly and with deceitful intent committed fraud.

367.775: Appeal Decision

(A) The hearing official's decision shall specify the reasons for the decision, identify the supporting evidence, identify the pertinent regulation or policy, and respond to reasoned arguments made by the household member or representative. The hearing official shall clearly state his finding of:

(1) Absence of Fraud

If the hearing official finds that the household member did not commit fraud, the Department shall send the household and the CSA/WSO a copy of the decision.

(2) Finding of Fraud

If the Hearing Official finds that the household member committed fraud, the Department shall send the household and the CSA/WSO a copy of the decision. Further, the worker shall send a written notice to the household member prior to implementing the appeal decision. The notice shall include reference to the appeal number and date of the appeal decision, indicate the month in which the disqualification will begin, and inform the remaining household members, if any, of the allotment they will receive during the period of disqualification or that they must reapply because the certification period has expired. The procedures for handling the income and resources of the disqualified member are described in 106 CMR 365.520.

367.800: Time Period for Rendering and Implementing Decision

Within 90 days of the date the household member is notified in writing that a hearing initiated by the Department has been scheduled, the Department shall conduct the hearing, arrive at a decision and initiate administrative action which will make the decision effective. The household member or representative is entitled to a postponement of up to 30 days. If the hearing is postponed, the 90 day time limit shall be extended for as many days as the hearing is postponed.

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367.825: Appeal After Department Hearing

After a household member has been found to have committed fraud in an administrative fraud hearing, that household member shall be disqualified for three months beginning with the first possible calendar month which follows the date the household member has received the Department hearing notice. The disqualification period shall be three months without regard to the amount of food stamps fraudulently obtained or the number of fraudulent acts the hearing official finds the individual has committed. There is no further administrative appeal procedure. The determination of fraud made in an administrative fraud hearing cannot be reversed by a subsequent fair hearing decision. The household member shall be advised of the right to appeal to a court of appropriate jurisdiction. The period of disqualification may be subject to stay or injunctive relief in a court of appropriate jurisdiction.

367.850: Court Imposed Disqualifications

A court of appropriate jurisdiction, with either the State, a political subdivision of the State, or the United States as prosecutor or plaintiff, may order an individual disqualified from participation in the program for not less than six months and not more than twenty-four months if the court finds that individual guilty of civil or criminal fraud. Court ordered disqualifications may be imposed separate and apart from any action taken by the Department to disqualify the individual through an administrative fraud hearing.

367.900: Duties and Limitations on the Department with Respect to Court Ordered Disqualification

The Department shall disqualify an individual found guilty of fraud by the courts only if the court orders disqualification and only for the length of time specified by the court. If disqualification is ordered but a date for initiating the disqualification period is not specified, the Department shall initiate the disqualification period with the first possible calendar month following the date the disqualification was ordered. A court ordered disqualification may run concurrently with the three month period of disqualification imposed as a result of an administrative fraud hearing. The Department shall not alter a court imposed or administratively imposed disqualification period contrary to a court order.

Trans. by S.L. 485

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ADMINISTRATIVE FRAUD HEARINGS

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367.925: Overturned Fraud Disqualification

In cases where a determination of fraud is overturned or reversed by a court of appropriate jurisdiction, the Department shall reinstate the individual in the program if the household is eligible. The Department shall restore any benefits that were lost as a result of the disqualification in accordance with the procedures specified in 106 CMR 366.500 through 580.

MEDICAL ASSISTANCE PROGRAM
PROJECT GOOD HEALTH

Chapter 480.000

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MEDICAL ASSISTANCE PROGRAM
PROJECT GOOD HEALTH

Chapter 480.000

Section 480.001

480.001 Introduction(A) Legal Basis

Federal law governing Medical Assistance Programs requires the establishment of a program of Early and Periodic Screening, Diagnosis and Treatment (EPSDT) for persons under the age of 21 who are eligible for Medical Assistance (see 42 U.S.C. 1396d(a)(4)(b) and 42 CFR 449.10(a)(3)). "Project Good Health" (PGH) is the name given to the EPSDT program established in the Massachusetts Medical Assistance Program. The regulations in this Chapter 480 of Title 106 replace the corresponding provisions of the Massachusetts Public Assistance Policy Manual, Chapter VII, Section V, and govern the administration of the PGH program. This Chapter 480 includes regulations establishing the duties and functions of PGH specialists and contracted providers. For regulations establishing the duties and functions of other employees of the Department relative to the PGH program, see the Massachusetts Public Assistance Policy Manual, Chapter II, Section A; the Assistance Payments Manual (6 CHSR III), Subchapter A, Part 303; and the Social Services Policy Manual (106 CMR 282.605 et seq.).

(B) Program Objectives

The objectives of the PGH program are:

- (1) to provide to eligible persons comprehensive and continuous health care designed to prevent illness and disability, and to establish an on-going provider-patient relationship;
- (2) to ensure early detection and prompt treatment of health problems before they become chronic or cause irreversible damage; and
- (3) to create an awareness of the availability and value of preventive health care services and to encourage maximum participation in the PGH program.

480.002 Definitions

Reference is made to 106 CMR 450.101 (the Medical Assistance Program Administrative Regulations), which defines common words and expressions appearing in this and other chapters of the Department's regulations relative to the Medical Assistance Program. In addition, the following words and expressions used in this Chapter 480 shall have the meanings given in this section unless the context clearly requires a different meaning. Words set in SOLID CAPS are defined elsewhere in this list or in 106 CMR 450.101.

- (A) Consultant -- a PROVIDER to whom a REFERRAL for additional screens or for treatment is made by a PGH PROVIDER.
- (B) Contracted Provider -- A PGH PROVIDER with whom the Department has entered into a PGH PROVIDER AGREEMENT pursuant to Section 480.005.

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Chapter 480.000

Section 480.002

- (C) Guidelines -- the Guidelines for Periodic Health Assessment developed by the Massachusetts Chapter of the American Academy of Pediatrics, and reproduced as Section 480.101 of this Chapter 480.
- (D) Health Assessment -- the performance for a PGH RECIPIENT of the screening package appropriate to the age, status, and history of the PGH RECIPIENT as indicated by the GUIDELINES.
- (E) PGH Program -- the Project Good Health program, which is described in this Chapter 480 (see Section 480.001).
- (F) PGH Provider -- a PROVIDER enrolled as a PGH PROVIDER pursuant to this Chapter 480, including CONTRACTED PROVIDERS and PROVIDERS with whom alternative arrangements have been made pursuant to Section 480.006.
- (G) PGH Specialist -- an employee of the Department assigned specifically to the PGH PROGRAM, whose principal function is to ensure the timely delivery of PGH services to PGH RECIPIENTS.
- (H) Referral -- a direction by a PGH PROVIDER to a PGH RECIPIENT to present himself in person to another PROVIDER for any test, examination, diagnosis, treatment, or other procedure which the referring PGH PROVIDER is unable to perform himself. The transmission of a specimen to a laboratory or other PROVIDER is not considered to be a referral.

480.003 PGH Recipient Eligibility

All Medical Assistance recipients who have not yet attained the age of 21 are eligible for PGH services. Medical Assistance recipients who are parents who have not yet attained the age of 21 are also eligible for PGH services.

480.004 Contracted Provider Eligibility

In order to qualify as a contracted provider, a person, agency, or facility must meet the following standards:

- (A) The provider must be able to provide, directly (i.e., in its own facility without referrals), substantially all of the health assessment procedures referred to in Subsection 480.008(A) other than laboratory services.
- (B) The provider must be able to provide, by referral, all of the health assessment procedures referred to in Subsection 480.008(A) which it does not provide directly.
- (C) The provider must be able to provide, directly, diagnostic and treatment services consistent with contemporary standards for the general practice of medicine, including referral linkages for laboratory procedures, vision and dental care, and specialty practice.

MEDICAL ASSISTANCE PROGRAM
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- (D) The provider must be able to perform the duties described in Section 480.009.
- (E) The provider must not be an agency or organization which customarily furnishes services without charge, or which restricts its services to persons eligible for Medical Assistance.
- (F) The provider must be organized in a manner which permits billing by a single person or entity in accordance with Section 480.011.
- (G) The provider and each employee or agent of the provider must be in compliance with every applicable statutory prerequisite relating to the services provided by such provider, employee, or agent, and to the facility in which such services are provided.

Prospective contracted providers include physicians, clinics, neighborhood health centers, hospital outpatient departments, health maintenance organizations, grantees under Title V of the Social Security Act (such as Children and Youth Projects, and Maternal and Infant Care Programs), and public or private youth service agencies.

480.005 Provider Agreements

Applicants for enrollment as contracted providers are required to complete a PGH Provider Questionnaire, designed to reveal whether the resources in staff, facilities, referral linkages, and time which they can commit to PGH meet the eligibility standards set forth in Section 480.004. Applicants determined by the Department to meet those standards will, upon the signing of the Department's PGH Provider Agreement, be enrolled as PGH providers as of the effective date of the agreement.

480.006 Non-Contracted Provider

Nothing in this Chapter 480 shall operate to prevent any provider who participates in the Medical Assistance Program in a provider category other than contracted PGH provider from continuing to provide services in that capacity to recipients eligible for PGH services, but the procedure codes listed in Section 480.011 shall be used only by contracted providers.

480.007 Alternative Provider

If the number of contracted providers in any area of the Commonwealth is insufficient to ensure the delivery of PGH services to all eligible recipients who want them by contracted or non-contracted providers, the Department shall make alternative arrangements with persons, agencies, and facilities in such areas that are ineligible to qualify as contracted providers, but that meet the standards set forth in Subsections (A), (B), (D), (F), and (G) of Section 480.004. The Department will make such alternative arrangements on an individual case-by-case basis, applying such other criteria as may be necessary to achieve the objectives of PGH.

MEDICAL ASSISTANCE PROGRAM
ABORTION SERVICES

Chapter 484.000

Section 484.005

484.005 Locations in Which Abortions May Be Performed

In accordance with M.G.L. c. 112 sec. 12I-12N, inserted by Chapter 706 of the Acts of 1974, and with Massachusetts Department of Public Health rules and regulations for licensure, abortions must be performed in compliance with the following:

(A) First Trimester Abortion

A first trimester abortion must be performed by a licensed and qualified physician in a clinic licensed by the Department of Public Health to perform abortions, or in a hospital licensed by the Department of Public Health to perform abortions.

(B) Second Trimester Abortion

A second trimester abortion must be performed by a licensed and qualified physician only in a hospital licensed by the Department of Public Health to perform abortions and to provide facilities for general surgery.

(C) Third Trimester Abortion

A third trimester abortion must be performed only to save the life of the mother or to eliminate substantial risk of grave impairment to her physical or mental health. A third trimester abortion must be performed by a licensed and qualified physician only in a hospital licensed by the Department of Public Health to perform abortions and to provide facilities for obstetrical services.

484.006 Provider Certification Requirements(A) Ambulatory Abortion Clinic

An ambulatory abortion clinic must be licensed by the Massachusetts Department of Public Health in compliance with the clinic licensure rules and regulations, and must comply with the "Regulations for Ambulatory Gynecological Surgery in Licensed Hospitals and Licensed Clinics" issued by the Department of Public Health. In order to receive payment from the Department, an ambulatory abortion clinic must be enrolled as a participating provider in the Medical Assistance Program. The Department will pay an ambulatory abortion clinic only for abortions performed in the first trimester.

(B) Hospital

A hospital in which abortions are performed must be licensed by the Massachusetts Department of Public Health in compliance with the hospital licensure rules and regulations, and must comply with the "Regulations for Ambulatory Gynecological Surgery in Licensed Hospitals and Licensed Clinics" issued by

THE COMMONWEALTH OF MASSACHUSETTS

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE

CODE OF MASSACHUSETTS REGULATIONS

TITLE 106 CMR CHAPTERS 501-507

THE MEDICAL ASSISTANCE POLICY MANUAL

1981



THOMAS H. SPIRITO

COMMISSIONER

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- (N) funds distributed to, or held in trust for, members of any Indian tribe pursuant to a judgment of the Indian Claims Commission of the Court of Claims;
- (O) the tax-exempt portions of payments made under the Alaska Native Claims Settlement Act;
- (P) payments to Native Americans under Public Law 94-114;
- (Q) housing subsidies received under any Massachusetts or federal housing program;
- (R) experimental Housing Allowance Program payments made under contracts entered into prior to 1975;
- (S) relocation payments made by federal, state, or other agencies completing public projects with federal or state assistance;
- (T) Disaster Relief Assistance payments;
- (U) payments for the foster care of a child if the child was placed in the applicant's or recipient's home by a public or private non-profit child placement or child care agency;
- (V) payments for a room and/or meals from a child of the grantee-relative, in a AFDC-Related filing unit;
- (W) The total amount of Social Security cost-of-living increases pursuant to section 504.540;
- (X) earned or unearned income needed to fulfill an SSA-approved self-support plan, for a SSI-Related individual;
- (Y) one-third of a child support payment received by a SSI-Related child from an absent parent;
- (Z) the value of food stamps;
- (AA) the value of assistance received under the Child Nutrition Act of 1966 and the National School Lunch Act;
- (BB) work-study income of undergraduate students in AFDC-Related units; and
- (CC) all earned income of any child who is a full-time student, or a part-time student but not a full-time employee.

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501.000: Overview of General Policies

This chapter introduces the Medical Assistance (MA) Program and the Department of Public Welfare, hereinafter, Department, which administers the Program in the Commonwealth of Massachusetts.

The policies described in this chapter are the basis of the administration and operation of the Program and support the policies in subsequent chapters. This chapter addresses the authority of the Department, the framework for the administration of the Program, the rights and responsibilities of applicants and recipients, and Program definitions.

501.100: Authority of the Department of Public Welfare

The Massachusetts Department of Public Welfare is established by Massachusetts General Laws, Chapter 18. Under this law, as amended, the Department administers various programs established or authorized by the Legislature or Special Laws of the Commonwealth, by Executive Order of the Governor of the Commonwealth, and by agreements with the United States Department of Health and Human Services (DHHS).

The regulations of the Department are promulgated in accordance with General Laws, Chapter 30A, as amended, and in accordance with other applicable General Laws of the Commonwealth.

501.200: The Medical Assistance (MA) Program

The Medical Assistance (MA) Program is a program in which the federal and state governments share the cost of payments to medical service providers on behalf of eligible individuals and families. At the federal level, the Program is authorized by Title XIX of the Social Security Act, and is administered by the Health Care Finance Administration of the Department of Health and Human Services (DHHS) (Medicaid Program). Massachusetts General Laws, Chapter 118E, as amended, provides for the Medical Assistance Program to be administered in the Commonwealth by the Massachusetts Department of Public Welfare.

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501.210: Administration of the Medical Assistance Program

Medical Assistance Program policy is formulated by the Commissioner's Policy Development Group (CPDG). Central Office provides general administrative direction for the Program.

Eligibility for Medical Assistance is determined at local Welfare Service Offices, Community Service Area Offices, Long-Term Care Eligibility Units and District Offices of the Social Security Administration for SSI cases.

501.220: Medical Assistance Eligibility Regulations

The Medical Assistance Policy Manual is the sole source of eligibility regulations of the Department and has the authority of law. Relevant regulations must be cited as support for case actions affecting the eligibility of applicants and recipients.

A copy of the manual shall be made available for public inspection at each of the Department's local offices.

501.230: Special Eligibility Situations and Limitations

- (A) Medical Assistance coverage is provided automatically to recipients of Aid to Families with Dependent Children (AFDC), Supplemental Security Income (SSI), the Refugee Resettlement Program (RRP) and the Cuban Program Phasedown (CPP).

Persons who have been denied assistance under one of these Programs may make separate application for Medical Assistance Only (MA Only).

All recipients of General Relief (GR) are eligible for limited medical benefits under the General Relief Medical Program (GRMP).

- (B) Persons under the age of 21 receiving General Relief (GR) may make separate application for MA Only.
- (C) An individual over the age of 21 who has been denied SSI because the individual is not found to be disabled within the meaning of the definition in section 1614(a)(3) of the Social Security Act is ineligible for MA Only unless:
- (1) the individual has received a waiver from the State Medical Review Team (SMRT) for Disability Assistance or MA-Disability Assistance prior to December 31, 1973; or

- (2) the individual would have been determined eligible for SSI if he had met the SSI requirement to accept treatment for drug addiction or alcoholism.
- (D) Persons who are recipients of assistance in another state are not eligible for Medical Assistance. When applying for Medical Assistance in the Commonwealth, a former recipient of assistance in another state shall verify that such assistance has been terminated.
- (E) Individuals who would be eligible for SSI because of blindness, except for their level of income or resources, shall apply for Medical Assistance with the Massachusetts Commission for the Blind.

501.300: Rights of Applicants and Recipients

The policies of the Medical Assistance Program shall be administered in accordance with federal and state law.

Applicants and recipients shall be informed in writing of their rights and responsibilities with respect to the Medical Assistance Program.

(A) Right to Nondiscrimination and Equal Treatment

Benefits under the Medical Assistance Program shall be provided to all eligible applicants and recipients on an equal basis and without discrimination. Providers shall provide services to all eligible recipients on an equal basis without discrimination.

(B) Right to Confidentiality

The confidentiality of case information is protected in accordance with applicable federal and state statutes and regulations. The use and disclosure of information concerning applicants and recipients is restricted to purposes directly connected with the administration of the Medical Assistance Program.

(C) Right to Timely Provision of Benefits

Eligible recipients have the right to the timely provision of benefits.

(D) Right to Information

Individuals who inquire about Medical Assistance, either orally or through a written request, shall be provided information about benefits, eligibility, and rights and responsibilities associated with the Medical Assistance Program.

Non-refugee alien applicants for MA shall be advised that the receipt of assistance may result in an adverse decision by the Immigration and Naturalization Service (INS), should the alien apply for "permanently admitted" status.

(E) Right to Be Assisted by Others

The applicant or recipient has the right to be assisted, accompanied or represented by any individual in any contact with the Department.

The party providing assistance may, under certain specified circumstances, act on behalf of an applicant or recipient.

(F) Right to Apply

Every person, individually, or through a representative, has the right, and must be afforded the opportunity without delay, to apply for Medical Assistance.

(G) Right to Inspection of the Case Record

The applicant or recipient has the right to inspect information in the case record in accordance with applicable statutes and privacy regulations, and to challenge the accuracy of case information.

(H) Right to Appeal

The applicant or recipient has the right to request, in writing, and be granted a prompt, fair hearing on any Departmental action or on any claim for service which is not acted upon with reasonable promptness; except, that the Department need not grant a hearing if the sole issue is a federal or state law requiring an automatic change adversely affecting some or all recipients.

501.400 Responsibilities of Applicants and Recipients

The applicant or recipient shall cooperate with the Department and provide information necessary to establish or maintain eligibility. Failure to cooperate may result in the denial or termination of assistance. Cooperation includes:

(A) Reporting Changes in Circumstances

The applicant or recipient shall report promptly and accurately to the Department any changes in circumstances that may affect eligibility.

(B) Providing Verification

The applicant or recipient shall provide all obtainable verifications required by the Department.

(C) Cooperating with Quality Control

When the recipient's case is selected for review, the recipient shall cooperate with representatives of the Department's Quality Control Division.

501.500: Definition of Terms

The following terms shall have the following meanings for the purposes of the MA Program:

(Words that appear in capitals are also defined or cross-referenced in this section.)

(A) Affidavit

An affidavit is a written or printed statement of fact sworn to or affirmed before some person having legal authority to administer such an oath.

(B) Aid to Families with Dependent Children (AFDC)

The Aid to Families with Dependent Children (AFDC) Program is a program that provides financial assistance to families with dependent children. AFDC recipients and their dependents are automatically eligible for Medical Assistance.

(C) Appeal

An appeal is a written request, by an aggrieved applicant or recipient, for a FAIR HEARING.

(D) Application

An application is a written request for assistance on a form prescribed by the Department.

(E) Assets

Assets are holdings of value that include, but are not necessarily limited to, cash, bank deposits, securities, real estate, cash value of life insurance, automobiles, boats and trailers and any other real or personal property.

(F) Asset Limitation

The asset limitation is the maximum dollar value of assets owned by, or available to, a FILING UNIT, which if exceeded, results in ineligibility.

(G) Assistance Unit

The assistance unit consists of those persons for whom assistance is applied for and those persons who are receiving Medical Assistance.

(H) Case Maintenance

Case maintenance consists of all activities necessary to maintain current and accurate case information and to meet all administrative requirements of the Department.

(I) Case Record

The case record is the permanent written collection of documents and information required to determine eligibility and to provide benefits to applicants and recipients.

(J) Competent Medical Authority

A competent medical authority is a physician or psychiatrist licensed by any state or a psychologist licensed by the Commonwealth of Massachusetts.

(K) Community Case

A community case is one in which the individual or family resides in the community and receives Medical Assistance for occasional and acute medical services.

(L) Dependent Child

A dependent child is a child under the age of 21 who meets certain specified requirements for relationship, living arrangements and DEPRIVATION.

(M) Deprivation

Deprivation is an eligibility requirement for a DEPENDENT CHILD applying for MA/AFDC and shall be established in accordance with 106 CMR 303.300.

(N) Disability

See PERMANENT AND TOTAL DISABILITY.

(O) Eligibility Worker

The eligibility worker is the Medical Assistance caseworker responsible for the determination of eligibility and CASE MAINTENANCE functions for applicants and recipients of Medical Assistance.

(P) Eligibility Process

The eligibility process consists of the activities conducted for the purpose of determining, redetermining, and maintaining the eligibility of a Medical Assistance applicant or recipient.

(Q) Eligible Dependent

An eligible dependent is the spouse and/or child of an applicant or recipient of institutional long-term care whose Net MA Income is below the applicable community MA INCOME STANDARD, and whose countable assets are below the applicable MA ASSET LIMITATION.

(R) Emancipated Minor

An emancipated minor is an individual under the age of 21 who is married, divorced, or separated; has served in the armed forces; has been emancipated by the courts; is 18 to 21 years of age and has established a residence apart from his or her parents; or is a disabled individual 18 to 21 years of age residing with his parents and not attending an educational or training program and is an applicant for, or recipient of, SSI-Related Medical Assistance.

(S) Equity Value

The equity value of an item is the FAIR MARKET VALUE less legal encumbrances, if any.

(T) Fair Hearing

Cross-reference: 106 CMR 343 et. seq. (Fair Hearing Rules)

(U) Fair Market Value

Fair market value is the amount a willing buyer with all knowledge of relevant facts with regard to an item would pay a willing seller.

(V) Filing Unit

The filing unit consists of all individuals whose assets and income must be considered in the determination of the financial eligibility of the ASSISTANCE UNIT. An individual may be in more than one filing unit but in only one ASSISTANCE UNIT.

(W) General Relief Medical Assistance

General Relief Medical Assistance is limited medical assistance to recipients of the General Relief program.

(X) Grantee-Relative

A grantee-relative is an adult who has a specified relationship to and resides with a DEPENDENT CHILD. In the MA-Under 21 Program, a grantee-relative is an adult who has a specified relationship to and resides with a child who is under the age of 21 and not emancipated.

(Y) Gross Income

Gross Income is the sum total of money, goods, or services, earned or unearned, such as salaries, wages, rents, tips, bonuses, annuities, or INCOME-IN-KIND, received from any source without regard to INCOME DEDUCTIONS.

(Z) Income Deductions

Income deductions are specified deductions which may be made from the GROSS INCOME of an applicant or recipient.

(AA) Income-In-Kind

Income-in-kind is income in any form other than cash provided to the applicant or recipient. It may consist of free services, free rent, free utilities, clothing, or food, but it is not necessarily limited to these. It may be earned or unearned.

(BB) Institution (Medical)

An institution is a public or private facility providing acute or chronic care.

(CC) Interim Change

An interim change is any case action that takes place between determinations of eligibility.

(DD) Long-Term Care Case

A Long-Term Care case is one in which a recipient receives institutional health care services over a continuous period of time.

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A long-term care facility is a licensed nursing home, chronic hospital, rest home, Intermediate Care Facility for the Mentally Retarded, State Mental Hospital, or State Tuberculosis Hospital.

(FF) MA Income Standard

The MA Income Standard is that Departmental standard used to determine if an applicant or recipient is eligible for MA without a SPEND-DOWN liability.

(GG) Net MA Income

Net MA Income is GROSS INCOME less applicable INCOME DEDUCTIONS and non-countable income.

(HH) Patient Paid Amount

The Patient Paid Amount is that portion of long-term care costs that must be borne by the recipient.

(II) Permanent and Total Disability

An individual shall be considered to be permanently and totally disabled if he is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months (or, in the case of a child under the age of 18, if he suffers from any medically determinable physical or mental impairment of comparable severity).

For purposes of this definition, an individual shall be determined to be under a disability only if his physical or mental impairments are of such severity that he is not only unable to do his previous work but cannot, considering his age, education, and work experience, engage in any other kind of substantial gainful work which exists in the national economy, regardless of whether such work exists in the immediate area in which he lives, or whether a specific job vacancy exists for him, or whether he would be hired if he applied for work. For purposes of the preceding sentence (with respect to any individual), "work which exists in the national economy" means work which exists in significant numbers either in the region where such individual lives or in several regions of the country.

(JJ) Personal Needs Allowance

The Personal Needs Allowance (PNA) is the designated portion of monthly income an individual in long-term care is allowed to retain for personal expenses. In some instances, the Department pays all or a portion of the PNA to the recipient. The PNA shall not be used for any item included in the daily rate at the long-term care facility.

(KK) Personal Needs Allowance (PNA) Account

The Personal Needs Allowance Account (PNAA) is an account administered by a LONG-TERM CARE FACILITY on behalf of a recipient.

(LL) Physical or Mental Incapacity

Physical or mental incapacity is a physical or mental handicap, illness, or impairment which substantially reduces or eliminates a parent's ability to support or care for the DEPENDENT CHILD and has existed, or is expected to exist, for a period of not less than 30 days.

(MM) Prospective Eligibility Period

The prospective eligibility period is a specified period of up to 6 months of future eligibility.

(NN) Quality Control

Quality Control is a system of continuing review to measure the accuracy of eligibility decisions.

(OO) Redetermination

A redetermination is a periodic review of a recipient's circumstances to establish whether a recipient remains eligible for benefits.

(PP) Representative

A representative is a person authorized by an applicant or recipient to act on his behalf, or a person acting responsibly on behalf of a physically or mentally incapable or deceased applicant or recipient. The representative must be sufficiently aware of the applicant's or recipient's circumstances to assume legal responsibility for the accuracy of statements made during the eligibility process.

(QQ) State Medical Review Team (SMRT)

The State Medical Review Team (SMRT) consists of physicians and disability evaluators who make medical determinations of PERMANENT AND TOTAL DISABILITY using guidelines established by the Social Security Administration under Title XVI.

(RR) Spend-Down Case

A spend-down case is one in which the NET MA INCOME of the applicant or recipient exceeds the applicable MA Income Standard. The filing unit must incur medical expenses equal to the excess income for the appropriate period of time before eligibility can be established.

(SS) Supplemental Security Income (SSI) Program

The Supplemental Security Income (SSI) Program provides financial assistance to needy persons who are age 65 or older, blind, or disabled. This program is established under Title XVI of the Social Security Act and is administered by the Social Security Administration (SSA).

(TT) Third Party Liability

Third party liability is the legal obligation of any person, company, or agency to pay all or a portion of the medical expenses of an applicant or recipient. Except where a specific agreement pursuant to 42 CFR 433.139 exists, the Department is in all instances the payor of last resort.

(UU) Third Party Resource

A third party resource is any person, company or agency incurring THIRD PARTY LIABILITY.

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502.000: Overview of the Eligibility Process

The eligibility process consists of the activities conducted for the purposes of determining, redetermining, and maintaining the eligibility of a Medical Assistance applicant or recipient.

As part of the eligibility process the applicant or recipient must meet the requirements of this chapter as well as the basic, categorical and financial eligibility requirements of later chapters.

502.100: Application Process

The application process consists of all activities conducted for the purpose of determining the eligibility of Medical Assistance applicants. These activities are initiated with the filing of an application and concluded with a final disposition of the application.

502.110: Right to Apply

Every person, individually, or through a representative, has the right, and must be afforded the opportunity without delay, to apply for Medical Assistance.

A mentally capable individual who files an application on behalf of himself or another assumes legal responsibility for the accuracy of all statements made during the application process.

502.120: Special Application Requirements

Special application requirements exist when application is made for:

(A) Retroactive Eligibility

When application is made for retroactive coverage, all eligibility requirements shall be examined according to actual conditions existing during that time, and application shall be made on a form prescribed by the Department.

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Eligibility may be retroactive to the first day of the third month prior to the month of application if covered medical services were received during such period and the recipient would have been eligible at the time such services were provided. Only income and assets which were actually available during the retroactive period shall be considered in determining eligibility.

(B) A Deceased Person

An application may be filed by a representative on behalf of a deceased individual. Eligibility is determined retroactive from the date of death but not earlier than the first day of the third month prior to the month of application.

When an individual dies after filing an application but before an eligibility determination has been made, eligibility shall be determined for the period between the date of application and the date of death, and retroactively upon proper application.

(C) The Blind

An application on behalf of a legally blind individual should be filed through the Massachusetts Commission for the Blind.

502.130: Application Activities

Application activities are:

(A) Completion of Application Form

The applicant shall be responsible for the completion of the form. The Department shall determine if the application is complete. The date of application shall be the date that a signed, completed, and dated application is received at the appropriate local office.

If an applicant for Medical Assistance has been denied assistance for AFDC or SSI within the 30 days prior to the application for MA, the date of application for MA shall be the date on which he applied for AFDC or SSI.

(B) Face to Face Interview

The Department has the right to require face to face interviews.

(C) Request for Specific Verifications

The worker shall notify the applicant, in writing, of all verifications required by the Department, the date by which such verifications must be received, and the consequence of a failure to provide such verifications.

(D) Request for Social Security Number

The worker shall request that the applicant furnish a Social Security number for himself and for each person for whom assistance is requested. If a number is not available, the worker shall request that the applicant ascertain the number or apply for a number and furnish such number to the Department upon receipt. The worker shall assist the applicant, if necessary, in completing an application for a Social Security number. However, failure to provide a Social Security number shall not render an applicant ineligible for Medical Assistance.

An applicant shall be advised of the uses the Department will make of his Social Security number.

(E) Request for Health Coverage Information

The Medical Assistance Program pays for health care services only when no other source of payment for the services is available. An applicant shall provide information on any existing health care coverage that is or may be available to any member of the filing unit.

If all conditions of eligibility are met, the Medical Assistance Program will provide payment for covered services not met by any other third party coverage.

502.140: Eligibility Determination

Every application process shall be concluded by a determination of eligibility as supported by the facts in the case record.

The applicant shall be notified in writing of the approval or denial. If eligibility is denied, the notice shall include the reasons for the denial, the specific regulations supporting the denial and an explanation of the right to appeal. If eligibility is approved, the notice shall include the effective date of eligibility.

Cross-reference: 106 CMR 343 et seq.

(A) Voluntary Withdrawal

The applicant or representative acting on behalf of the applicant may voluntarily withdraw his application. A representative may also withdraw an application for a deceased applicant. The request to withdraw an application shall be made in writing, shall be confirmed by a notice sent to the applicant, and shall be recorded in the case record.

(B) Inability to Locate

Eligibility shall be denied when the worker has attempted to contact the applicant by mail and the mail is returned as undeliverable with no forwarding address, and other reasonable attempts to locate the applicant have been unsuccessful.

502.150: Time Standards for Eligibility Determination

A determination of eligibility must be made within Departmental timeliness standards except in unusual circumstances, e.g., delay on the part of an applicant or third party.

A temporary Medicaid Eligibility Card may be issued in accordance with Departmental provisions.

502.160: Date of Eligibility

The effective date of prospective eligibility is the first day of the month of application on which the applicant met all eligibility requirements.

The effective date of retroactive eligibility is the first day of the third calendar month period immediately prior to the month of application on which the applicant met all eligibility requirements.

502.200: Redetermination Activities

A redetermination is a periodic review of a recipient's circumstances to establish whether the recipient remains eligible for benefits. A secondary purpose of the redetermination process is to detect fraud.

Redetermination activities are:

(A) The Completion of the Prescribed Redetermination Form

The recipient shall be responsible for the completion of the form. The Department shall determine if the form meets the requirements for a redetermination.

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(B) Face to Face Interview

The Department may require face to face interviews as deemed necessary.

(C) Request for Specific Verifications

The worker shall notify the recipient in writing of all required verifications, the date by which such verifications must be received, and the consequence of a failure to provide such verifications.

(D) Request for Social Security Number

The worker shall request that a Social Security number be provided as specified in section 502.130(D).

(E) Request for Health Coverage Information

The Medical Assistance Program pays for health care services only when no other source of payment for the services is available. An applicant shall provide information on any existing health care coverage that is or may be available to any member of the filing unit.

If all conditions of eligibility are met, the Medical Assistance Program will provide payment for covered services not met by any third party coverage.

502.210: Eligibility Redetermination

Every redetermination process shall be concluded by a redetermination of eligibility. The redetermination of eligibility must be supported by the facts in the case record.

The recipient shall be notified in writing if eligibility is to be terminated. The notice shall include the reasons for the termination, the specific regulations supporting termination, the effective date of the termination and an explanation of the right to appeal. If eligibility is to continue uninterrupted, no notice need be sent.

(A) Voluntary Withdrawal

The recipient may request at any time that eligibility be terminated. If the request is made in writing, eligibility may be terminated without advance notice. If the request is oral, a 10 day termination notice shall be mailed.

(B) Inability to Locate

Eligibility shall be terminated when the worker is unable to complete the redetermination process because the recipient cannot be located. If mail is returned as undeliverable with no forwarding address and other reasonable attempts to locate the recipient have failed, eligibility shall be terminated.

(C) Failure to Submit Redetermination Form

If the recipient fails to submit the redetermination form within 30 days of the date mailed, eligibility shall be terminated.

502.220: Time Standards for Redetermination

A redetermination shall be completed at least every 6 months. Eligibility shall be redetermined more frequently if the Department obtains information indicating changes which affect eligibility or benefit level.

502.300: Case Maintenance

Case maintenance consists of any activities that are necessary to maintain current and accurate case information, to provide services to applicants and recipients, and to meet any administrative requirements of the agency. Case maintenance activities performed by the eligibility worker must be documented in the case record.

502.310: Maintaining the Case Record

The case record shall contain the application and redetermination forms, verifications, notifications, and other materials supporting a determination of eligibility or ineligibility, or any other case action.

502.320: Interim Changes

An interim change is any case action that takes place between determinations of eligibility. An interim change may result from information from any source including the Department.

If requested by the Department, the recipient shall provide additional verification. The worker shall notify the recipient of the specific verification needed, the date by which such verification must be received, and the consequence of failure to provide such verification. If the reported change indicates a need for comprehensive review of eligibility, the recipient may be required to submit a redetermination form and participate in the complete redetermination process.

(A) Responsibility for Reporting Changes in Circumstances

The applicant or recipient shall report to the Department within 10 calendar days all changes in circumstances that may affect his eligibility.

(B) Time Standards for Interim Changes

A change of address must be implemented within 14 days of the date on which the change was reported or the date on which the Department learned of the change.

Other interim changes which are required must be made by the worker as soon as possible but no later than 45 days from the date on which they are requested.

502.330: Issuance of the Medicaid Eligibility Card

A Medicaid Eligibility Card shall be provided by mail to each assistance unit for each month of prospective eligibility. All eligible members of the assistance unit, and any restrictions on the use of the card, shall be listed on the card.

(A) The Temporary Medicaid Eligibility Card

A Temporary Medicaid Eligibility Card shall be issued to an applicant or recipient of Medical Assistance, including those eligible as categorically needy, when all the following conditions are met:

- (1) the applicant or recipient has been determined eligible for Medicaid;
- (2) the applicant or recipient requests a Temporary Medicaid Eligibility Card;
- (3) the Medicaid Eligibility Card or Temporary Card has been lost, stolen, or not yet received.

(B) Time Standards for Issuance of Medicaid Eligibility Card

A Temporary Medicaid Eligibility Card shall be issued no later than the next working day following the date of request.

502.340: Issuance of PNA Replacement Checks

When a PNA check is reported stolen, lost, or not received, the worker shall determine the address to which the check was mailed and whether the check has been returned to the Department. If the check can be located, it shall be mailed to the recipient.

If the recipient has reason to believe that the check was stolen, the recipient or representative shall report the suspected theft to the police immediately.

The recipient may request a replacement check. The date of request shall be the date the recipient completes the prescribed form. The recipient shall be advised to return the original check if it is subsequently located or received.

(A) Authorization of a Replacement Check

The worker shall approve a request for a replacement check when all of the following conditions have been met:

- (1) the original check is reported as lost, stolen, or not received;
- (2) the original check cannot be located;
- (3) at least 5 days have elapsed since the date the check was scheduled to be received, or at least 5 days have elapsed since the date the check was lost or reported stolen; and
- (4) no more than 30 days have elapsed since the issuance of the original check. The office director or his designee shall be authorized to approve the replacement of a check if more than 30 days have elapsed since the issuance of the original check.

502.350: Time Standards for Issuance of Replacement Checks

The Department shall issue a replacement check within 26 days of the date the recipient signs the prescribed form.

If the original check is subsequently located and found to have been cashed, the recipient must also sign a notarized statement that the endorsement is not his. If the recipient admits to signing the original check or refuses to sign the notarized statement, the worker shall refer the case to the Bureau of Special Investigations.

502.400: Verifications

Verification is the validation of oral or written statements through the use of documentation and third party contacts during the eligibility or redetermination processes. All documentation, as well as information obtained through third party contacts, shall be made part of the case record.

502.410: Responsibility for Providing Verifications

The applicant or recipient shall provide all requested verifications and shall be advised of the consequence of unreasonable failure to provide such verifications. To the extent necessary, the worker shall assist the applicant or recipient in obtaining the required verifications.

502.420: Notice of Verifications

The applicant or recipient shall be advised and shall acknowledge in writing his understanding that all statements supporting the application for benefits are subject to verification, including contacts with collateral sources.

502.430: Methods of Verification

Verifications may be:

(A) Original Documents

Original documents may be used for verification provided that the original or a copy is included in the case record.

(B) Affidavits

An affidavit is acceptable only where specified within this Manual and only when the applicant or recipient has demonstrated that an unsuccessful attempt to obtain the appropriate document has been made.

The affidavit shall be filed in the case record.

(C) Statements of Third Parties

The worker may accept third party statements only when the original document, photocopy, or affidavit is not available; provided that its inclusion in the case record is authorized by the local office director or his designee.

502.440: Time Standards for Verifications

The applicant or recipient shall provide all required verifications, or an acceptable reason for their unavailability, within 10 days of the written request by the worker.

502.500: Notifications

The applicant or recipient shall be provided with the written notice of any adverse action to be taken by the Department.

Notice shall include a statement of the action; the reasons for the action; the regulatory citations supporting the action; an explanation of the right to request a fair hearing; the method by which a hearing may be obtained; and the right to represent himself or to be represented.

In cases of an action based on a change in law, the applicant or recipient shall be notified of the circumstances under which a hearing will be granted.

When an institution or a representative makes application on behalf of an individual, notification shall be sent both to the named applicant and to the institution or representative.

In the case of death, notification shall be sent to the executor, administrator or other legal representative of the deceased's estate.

Cross-reference: 106 CMR 302.500.

502.600: Appeals

Cross-reference: 106 CMR 302.600

502.610: Right to Appeal

Cross-reference: 106 CMR 302.600

502.620: Time Standards for Appeals

Cross-reference: 106 CMR 302.600

502.700: Cooperation with Quality Control

The Division of Quality Control periodically conducts an independent review of all eligibility factors and payments in a sampling of cases.

When a case is selected for review the recipient shall cooperate with the representative of the Quality Control Division. Cooperation shall include, but not be limited to, a personal interview, and the furnishing of requested information.

Refusal or failure of the recipient to cooperate shall result in the termination of assistance.

502.800: Fraud

Any person who obtains benefits by knowingly and deliberately making false statements, suppressing facts, withholding information, making misrepresentations, or failing to give information about a change in circumstances that would affect eligibility, commits fraud.

502.810: Referrals to Investigative Units

In all cases of suspected fraud, the eligibility worker shall make a referral to the Bureau of Special Investigations. Cases of suspected vendor fraud shall be referred to Provider Review and Sanctions.

502.820: Recovery

The Department has the right to recover overpayments and/or monies, or the value of benefits, that are wrongfully or fraudulently obtained.

No lien or encumbrance, however, shall be imposed on the property of any individual prior to his death because of medical assistance paid or to be paid on his behalf, except pursuant to a court judgment for benefits incorrectly paid on behalf of a recipient.

502.900: Estate Recoveries

A recovery of correctly paid Medical Assistance from the estate of a deceased recipient is made only for assistance paid after the recipient was 65 years of age or older. Recovery can be pursued only after the death of a surviving spouse, if any, and only at a time when there is no surviving child who is blind, disabled, or under the age of 21.

In no event, however, shall any action to recover be brought except with the written approval of the General Counsel or his designee.

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MEDICAL ASSISTANCE
BASIC ELIGIBILITY REQUIREMENTS503.000: Overview of Basic Eligibility Requirements

All Medical Assistance applicants and recipients shall meet the basic eligibility requirements.

The basic eligibility requirements are residence, citizenship or alienage, utilization of potential benefits, and assignment for recovery.

503.100: Residence(A) Requirements

As a condition of eligibility, an applicant or recipient shall be living in the Commonwealth with the intent to remain permanently or for an indefinite period; or

shall be living in the Commonwealth at the time of application, having entered the Commonwealth with a job commitment or to seek employment, whether or not currently employed (e.g., migrant and itinerant workers).

(B) Verifications

- (1) Verification of "living in the Commonwealth" with the intent to remain permanently or for an indefinite period is mandatory. The preferred sources of verification are:
 - a. a deed or other evidence of ownership of the property used as the applicant's or recipient's home;
 - b. a lease or other rental agreement for the property used as the applicant's or recipient's home;
 - c. voter registration record;
 - d. utility company record or bill bearing the applicant's or recipient's name and address;
 - e. motor vehicle license or registration.

- f. a receipt or cancelled check for rent or mortgage payment;
 - g. a signed statement from the landlord or owner of a residence, provided that the landlord or owner is not a relative of the applicant or recipient;
 - h. postal service record containing the applicant's or recipient's name and address;
 - i. church or religious institution record;
 - j. an employment record; or
 - k. SC-1 for long-term care cases.
- (2) The mandatory verification of a job commitment or an intent to become employed shall be a written statement from an employer, a job registration card or a DES registration card.

503.110: Temporary Absence

(A) Requirements

Temporary absences from the Commonwealth, with subsequent returns, or intent to return when the purposes of the absence have been accomplished, do not interrupt continuity of residence as long as the individual maintains a residence or has the intent to reside in the Commonwealth during the absence.

Temporary absences may be for health, business, school, vacation or family commitments. Temporary absences may include absences outside the United States and its territories.

(B) Verifications

Absence in excess of 30 days shall create a presumption of intent to abandon Massachusetts residency. The presumption may be rebutted by evidence of:

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- (1) an identifiable residence in the Commonwealth or/an intent to maintain residency as required by section 503.100; and
- (2) the temporary nature of the absence in excess of 30 days as documented by medical records, short term business contracts, records of school attendance, etc.

503.120: Residence of Institutionalized Individuals(A) Requirements

- (1) An individual who has been placed in an institution in another state through arrangements made by a public agency of the Commonwealth shall be considered a resident of the Commonwealth. An individual who has been placed in an institution in the Commonwealth by a public agency of another state shall not be considered a resident of the Commonwealth.
- (2) When an institutional placement has been made by other than a public agency residency is determined as follows:
 - (a) An individual under the age of 21, is a resident of the same state as the parent or legal guardian who applies on his behalf.
 - (b) An individual 21 years of age or older who became incapable of indicating intent to reside before reaching age 21, is a resident of the same state as the parent or legal guardian who applies on his behalf.
 - (c) An individual who became incapable of indicating intent at or after age 21 is a resident of the state in which he was residing when he was first determined to be incapable of indicating intent.
 - (d) An individual who is over the age of 21 and who is capable of indicating intent shall be considered a resident of the state in which the institution is located.
 - (e) An applicant or recipient under the age of 21 who is a patient in an Intermediate Care Facility for the Mentally Retarded (ICF/MR) and whose parent(s) or guardian subsequently moves outside the Commonwealth remains a resident for Medical Assistance purposes.

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- (3) The residence of individuals in penal, tuberculosis and mental disease institutions shall be treated in accordance with the provisions of sections 503.130 and 503.140.

(B) Verifications

- (1) The mandatory verification that an institutional placement was made by a state agency shall be a signed statement or document from the institution or agency.
- (2) The mandatory verification of the institutionalized individual's age shall be in accordance with section 504.600.
- (3) The mandatory verification of ability to indicate intent shall be documentation from a competent medical authority indicating the date at which the individual was medically determined to be incapable.

503.130: Persons in Penal Institutions

An applicant or recipient who is an inmate of a penal institution shall not be eligible for Medical Assistance. Inmate status is not interrupted or terminated by a transfer to a public or private medical or mental institution.

503.140: Persons Institutionalized for Tuberculosis or Mental Disease

An individual under the age of 65 who is a patient in a public or private institution for mental disease or tuberculosis is not eligible for Medical Assistance.

An individual who enters an acute hospital from an institution for mental disease or tuberculosis may establish eligibility for Medical Assistance while on in-patient status if otherwise categorically eligible.

503.200: Citizenship and Alienage

(A) Requirements

To be eligible for Medical Assistance, an applicant or recipient must be one of the following:

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- (1) a citizen of the United States; i.e., any individual born in the United States or its territories; born of a parent who is a U.S. citizen; or naturalized;
- (2) an alien lawfully admitted as an immigrant with permanent residence;
- (3) an alien lawfully admitted as a non-immigrant by statutory acknowledgement of continuous residence;
- (4) an alien lawfully admitted as a refugee with conditional entrance; or
- (5) a Canadian-born American Indian.

Aliens unlawfully residing in the United States or its territories shall not be eligible for Medical Assistance.

Aliens lawfully admitted for a temporary purpose, such as students, visitors, and diplomats, shall not be eligible for Medical Assistance.

A child who meets any of the conditions specified in (1) through (5) of this section shall be eligible regardless of the citizenship and alien status of the parents or legal guardians. A parent or guardian may be a grantee-relative regardless of his citizenship and alien status.

(B) Verifications

The verification of citizenship is mandatory. Citizenship shall be verified by one of the following:

- a. birth certificate;
- b. baptismal record;
- c. passport;
- d. hospital birth record;
- e. United States census record;
- f. voter registration;
- g. court records;
- h. naturalization certificate;

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- i. U.S. Citizen Identity Card
(IN Form I-179);
 - j. U.S. Citizen Resident's Card
(IN Form I-197);
- (2) The verification of alien status is mandatory. The preferred sources of verification are:
- a. Alien Registration Receipt Card
(INS Form I-151)
 - b. Reentry Permit and an Alien
Registration Receipt Card
(INS Form I-151)
 - c. INS Form I-94
 - d. Registration Card Issued by the
Cuban-Refugee Center and dated before
October 1, 1978.

503.210: American Indians Born in Canada(A) Requirements

A person with at least 50 percent of Indian blood who was born in Canada and who has maintained residence in the United States since his entry is considered lawfully admitted as a non-immigrant for purposes of eligibility.

(B) Verifications

The verification of the lawful admittance of a Canadian-born Indian is mandatory and shall be one of the following:

- (1) a "band card" issued by the band council of a Canadian Indian reserve;
- (2) birth or baptism record indicating Canadian birth and providing evidence of Indian lineage;
- (3) a provincial Union of Indians card (such as a Union of Nova Scotia Indians card); or
- (4) an affidavit from a tribal official or other person with knowledge of the applicant's or recipient's family ancestry.

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BASIC ELIGIBILITY REQUIREMENTSChapter 503
Page 503.300503.300: Utilization of Potential Benefits(A) Requirements

An applicant or recipient shall take all necessary steps to obtain benefits for which he may be eligible, unless he can show good cause for not doing so. Benefits under this provision include, but are not limited to the following:

- (1) Social Security benefits;
- (2) Medicare, Part A;
- (3) Railroad Retirement benefits;
- (4) Federal Veterans Administration benefits;
- (5) Civil Service Annuities;
- (6) Unemployment Compensation;
- (7) Worker's Compensation;
- (8) State Retirement pensions; and
- (9) any other pension or benefits.

Medical Assistance shall be provided while claims for other benefits are pending provided that eligibility is re-determined at the time of receipt of any such benefits.

Applicants and recipients shall not be required to apply for AFDC, GR, SSI, or Mass. State Veteran's Service benefits.

(B) Verifications

The verification of application for any benefits for which an applicant or recipient may be eligible is mandatory and shall be an official document from the appropriate agency or a signed statement from an agency representative certifying that application has been made.

503.400: Assignments for Third Party Recoveries

An applicant or recipient who, due to any accident, injury, or illness, may be eligible to receive compensation from a third party shall file a claim for such compensation.

Any applicant or recipient who files a claim for third party compensation shall make an assignment on the prescribed form conveying and transferring to the Department the right to recover an amount equal to the Medical Assistance benefits provided from either the recipient or the third party.

The applicant or recipient shall assist the worker by providing information pertinent to the third party claim and shall, if necessary, cooperate with the Department's Assignment Collection Unit.

An applicant or recipient's failure to cooperate with the Department shall result in a denial or termination of Medical Assistance.

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504.000: Overview of Categorical Requirements

Eligibility for the Medical Assistance Program is based on the financial and categorical requirements of two federal assistance programs: Aid to Families with Dependent Children (AFDC) and Supplemental Security Income (SSI).

Families with children under the age of 21 and individuals under the age of 21 shall establish eligibility based on certain AFDC Program requirements and are referred to as AFDC-Related assistance units.

Aged and disabled individuals shall establish eligibility based on certain SSI Program requirements and are referred to as SSI-Related assistance units.

504.100: AFDC-Related Programs

Families with children under the age of 21 and individuals under the age of 21 may receive Medical Assistance benefits or establish eligibility as AFDC-Related assistance units if they meet the requirements of one of the following programs:

- (A) the AFDC Program (Recipients);
- (B) the MA-AFDC Program; and
- (C) the MA-Under 21 Program.

504.110: AFDC Recipients: Automatic Eligibility

Current AFDC recipients are eligible for MA without filing a separate application.

Members of an AFDC assistance unit whose AFDC assistance has terminated solely due to increased income from employment or increased hours of employment shall be eligible for MA for the four calendar month period beginning with the month in which the family becomes ineligible for AFDC, provided that:

1. the unit received AFDC in any 3 or more of the 6 months immediately preceding the month of termination from AFDC; and

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- (2) a member of the assistance unit continues to be employed for the four months subsequent to the month of termination from AFDC. This need not be the same person for the entire four month period.

If the AFDC assistance unit erroneously received benefits past the date of ineligibility, the four month period begins with the actual month of ineligibility.

504.120: AFDC-Related: MA-AFDC

Certain families with children may establish eligibility for Medical Assistance by making separate application for the MA-AFDC Program.

An MA-AFDC filing unit shall consist of a grantee-relative and at least one dependent child under the age of 21, or a pregnant woman. A dependent child may be an SSI recipient.

The income and assets of the grantee-relative who is the natural or adoptive parent of the dependent child shall be considered as available in determining eligibility for the assistance unit. If the grantee-relative is not the natural or adoptive parent of the dependent child, he and his spouse may elect to be included in the assistance unit provided they meet the categorical eligibility requirements. The income and assets of the grantee-relative who is not the parent, but who elects to be included in the assistance unit, shall be considered available in determining eligibility for the filing unit.

Families with children who may establish eligibility for MA-AFDC include families that would be eligible for AFDC except for the following factors:

- (A) the filing unit's total net income exceeds the AFDC Standard of Assistance;
- (B) the filing unit's total countable assets exceed the AFDC assets limitation;
- (C) the 16 to 21 year old does not meet AFDC WIN or school attendance requirements; or
- (D) the applicant chooses not to apply or complete the application process for AFDC eligibility.

504.130: AFDC-Related: MA-Under 21

Certain individuals under age 21 may establish eligibility for Medical Assistance by making a separate application for the MA-Under 21 program.

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An MA-Under 21 filing unit consists of an individual under the age of 21 and his parents (or other grantee-relative at that person's option) with whom he resides, or a single individual between the ages of 18 and 21 living apart from his parents.

When an individual under the age of 21 resides with his parent(s), the income and assets of the parent(s) are considered in determining eligibility for the filing unit. However, the assistance unit is limited to members of the filing unit who are under 21.

If a single individual between 18 and 21 does not live with the natural or adoptive parents only the income and assets of the individual under 21 are considered in determining eligibility of the filing unit and only that individual will be eligible for Medical Assistance.

The income and assets of the parents of an emancipated individual under 21 are not considered whether or not parents and child are living together.

If the person under the age of 21 is in the custody of a non-profit foster care agency, he may establish eligibility for the MA-Under 21 Program. Only the child's income and assets, as well as any support payments received by him, are considered in the determination of eligibility.

504.200: Age (Under 21)(A) Requirements

As a condition of eligibility for MA-AFDC, the dependent child must be under the age of 21. As a condition of eligibility for MA-Under 21, the individual for whom eligibility is requested must be under the age of 21.

The MA-AFDC requirement for a dependent child may be met by an unborn child when there are no other children in the home who are receiving Aid to Families with Dependent Children (AFDC). Until the child is born, assistance may be authorized for the pregnant woman only. Her spouse is not eligible unless he is under 21 years of age.

(B) Verifications

The verification of age is mandatory. Age shall be verified by one of the following:

- (1) birth certificate;
- (2) court records (e.g., adoption, separate support, adjudication of paternity); or
- (3) hospital birth record.

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If none of the above documents is available, two of the following may be accepted, provided they both contain date of birth:

- (1) family bible or genealogical records;
- (2) baptismal certificate;
- (3) United States census records;
- (4) Social Security (RSDI) benefit records;
- (5) Immigration and Naturalization records;
- (6) school records;
- (7) insurance policies;
- (8) employment records;
- (9) newspaper records and local histories;
- (10) Indian agency records;
- (11) child welfare service records;
- (12) voluntary social service records;
- (13) church records;
- (14) passport;
- (15) Head Start Program records;
- (16) Day Care Center Records;
- (17) other governmental records; or
- (18) an affidavit of a knowledgeable third person, if the applicant or recipient has demonstrated that he has tried unsuccessfully to obtain appropriate documents.

Mandatory verification of pregnancy when there are no other dependent children in the home who are receiving Aid to Families with Dependent Children (AFDC) shall be a written statement from a competent medical authority certifying the pregnancy and the expected date of birth.

504.300: Relationship and Living Arrangements

As a condition of eligibility for MA-AFDC, the dependent child must live in a place maintained as a home with one or more persons to whom the child is related.

504.310: Relationship(A) Requirements

In MA-AFDC cases the grantee-relative must be related to the dependent child in accordance with the provisions of 106 CMR 303.210(A) (1) through (4).

(B) Verification

Verification of relationship shall be in accordance with 106 CMR 303.210(B).

504.320: Living Arrangements

(A) Requirements

In MA-AFDC cases the living arrangement of the dependent child and the grantee-relative shall be in accordance with the provisions of 106 CMR 303.230(A).

(B) Verifications

The verification of living arrangements shall be in accordance with 106 CMR 303.230(B).

504.400: Deprivation

As a condition of eligibility for MA-AFDC, the dependent child must be deprived of the care or support of at least one parent through the death, continued absence, physical or mental incapacity, or unemployment of parent who is the principal earner, as defined by Section 504.440, whether or not the parents are or were married to each other.

Deprivation can be established only with regard to the child's natural or adoptive parent.

504.410: Death

(A) Requirements

A dependent child may be considered deprived of care or support on the basis of the death of either parent in accordance with the provisions of 106 CMR 303.310(A).

(B) Verification

The verification of a parent's death shall be in accordance with the provisions of 106 CMR 303.310(B).

504.420: Continued Absence

(A) Requirements

The continued absence of a parent constitutes deprivation in accordance with the provisions of 106 CMR 303.320(A).

(B) Verification

The verification of continued absence shall be in accordance with the provisions of 106 CMR 303.320(B).

504.430: Physical or Mental Incapacity(A) Requirements

The physical or mental incapacity of a parent constitutes deprivation in accordance with the provisions of 106 CMR 303.330(A).

(B) Verification

The verification of physical or mental incapacity shall be in accordance with the provisions of 106 CMR 303.330(B) with the following exception: a competent medical authority is an individual defined in section 501.500(J).

504.440: Unemployment

A dependent child is considered deprived of care or support if the natural or adoptive parent who is the principal earner is unemployed. In order for the principal earner to be considered unemployed for eligibility purposes, the principal earner shall: be unemployed or underemployed; have a work history; have applied for unemployment compensation, if applicable; have not terminated or reduced employment, or refused a bona fide offer of employment or training without good cause.

(A) Principal Earner(1) Requirements

The principal earner is the parent who earned the greater amount of income of the two parents in the 24-month period immediately prior to application for benefits. If both parents earned an identical amount of income in the 24-month period, the Department shall designate which parent shall be the principal earner. Once the principal earner is identified, the designation may not be changed until the Medical Assistance case is closed and a new application has been made.

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Verification of a parent's unemployment is mandatory. The preferred source of verification is one of the following: a current unemployment registration card, unemployment compensation payment notice or check, lay-off notice, or letter of dismissal from the last employer.

Verification of the number of hours worked is mandatory when underemployment is claimed. The preferred source of verification is either pay records or a statement from the employer or former employer.

(B) Work History(1) Requirements

The parent meets the requirement for a work history if he:

- a. has 6 or more quarters of work in which he received earnings of not less than \$50.00 in each quarter, or participated in a community work and training program or under the Work Incentive (WIN) Program, in any 13 calendar-quarter;
- b. received UC benefits under an Unemployment Compensation law of any state or of the United States at some time during the year prior to the date of application for Medical Assistance;
- c. was qualified to receive UC benefits under a UC law of any state or of the United States at some time during the year prior to the date of application for Medical Assistance but did not apply for UC; or
- d. performed work not covered by UC, which if covered would have created eligibility for UC within one year prior to the application for Medical Assistance.

NOTE: A "quarter of work" means any one of four periods consisting of 3 consecutive calendar months ending on either March 31, June 30, September 30, or December 31.

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Verification of the unemployed or underemployed parent's work history is mandatory. The appropriate sources of verification are any of the following, depending on the case circumstances: present pay stubs, statement(s) from former employer(s), document from a WIN or other work or training program, or documents from an unemployment agency.

(C) Unemployment Compensation(1) Requirements

As a condition of eligibility, the unemployed or underemployed parent(s) must have applied for any Unemployment Compensation to which he may be entitled.

(2) Verifications

Verification of the application for Unemployment Compensation is mandatory. The only acceptable source of verification is a document from the Division of Employment Security.

(D) Bona Fide Offer and Good Cause(1) Requirements

The unemployed or underemployed parent may not have refused a bona fide offer of employment or training for employment without good cause within the 30-day period prior to the first date of Medical Assistance eligibility, or at any time during the period of eligibility for Medical Assistance.

Good cause for refusal is present when:

- a. the offer was made at a wage level below an applicable minimum wage requirement and below the customary wage for such work in the community;
- b. the individual was physically unable to engage in such employment or there were no means of public or private transportation available to and from the place of employment;
- c. the working conditions were not adequate to ensure health or safety; or

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Verification of principal earner status is mandatory. The 24-months of employment preceding application shall be verified by wage stubs; written statements from a former employer(s); or a copy of federal income tax returns. Both parents must submit this verification, regardless of when their relationship began. In instances when the parents cannot obtain the above verifications, the Department may designate the principal earner on the basis of the evidence that is available.

(B) Unemployment or Underemployment(1) Requirements

The principal earner must have been unemployed, or employed for less than 100 hours per month for at least 30 days prior to receipt of Medical Assistance. The date of eligibility for Medical Assistance is the 31st day of unemployment or underemployment.

The principal earner may be eligible if employed more than 100 hours per month, if the principal earner's work is intermittent and the excess is of a temporary nature. The excess is temporary if the principal earner worked an average of fewer than 100 hours per month for the two months prior to the date of eligibility, as defined above, and is expected to work fewer than 100 hours during the next month.

(2) Verification

Verification of unemployment is mandatory and shall be by a current unemployment registration card, unemployment compensation payment notice, lay-off notice, or letter of dismissal.

Verification of hours worked is mandatory and shall be as follows: by pay stubs, or by a written statement from the employer or former employer.

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(C) Work History(1) Requirements

The principal earner meets the work history requirements if the principal earner:

- a. Has six or more quarters of work in which the worker received earnings of not less than \$50.00 in each quarter, or has six or more quarters of participation in a Community Work Experience Program, the WIN Program, or WTP, in a 13 calendar-quarter period ending within one year prior to the application for Medical Assistance; or
- b. Received Unemployment Compensation under an Unemployment Compensation law of a state or of the United States at some time during the year prior to application for Medical Assistance; or
- c. Was qualified to receive Unemployment Compensation under an Unemployment Compensation law of a state or of the United States at some time during the year prior to application for Medical Assistance, but did not apply for Unemployment Compensation; or
- d. Performed work not covered by Unemployment Compensation, which, if covered, would have created eligibility for Unemployment Compensation within one year prior to the application for Medical Assistance.

NOTE: A "quarter of work" is a period of three (3) consecutive calendar months ending on March 31, June 30, September 30, or December 31.

(2) Verification

Verification of work history is mandatory and shall be as follows: pay stubs; a written statement from a former employer(s); or documents from an employment agency. The Department shall verify participation in Community Work Experience, WIN or WTP.

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The principal earner must have applied for any Unemployment Compensation to which the principal earner may be entitled.

(2) Verification

Verification of application for Unemployment Compensation is mandatory and shall be by documents of the Division of Employment Security.

(E) Bona Fide Offer and Good Cause

The principal earner may not have terminated or reduced employment, or refused a bona fide offer of employment or training for employment without good cause, as defined by subsection (1) below, within the 30-day period prior to the first date of Medical Assistance eligibility.

(1) Requirements

Good cause exists only when the employment, or offer of employment:

- a. is at a wage level below the applicable federal or state minimum wage requirement; or
- b. requires travel to and from the place of employment that exceeds a total of two hours in round trip time, excluding the time necessary to transport family members to and from a school or place providing care. Where walking is the only available means of transportation, the round trip distance shall be no more than 2 miles; or
- c. involves specific job responsibilities that the individual is physically incapable of performing; or
- d. involves conditions that are in violation of applicable state health and safety standards; or
- e. does not provide for Workmen's Compensation.

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Verification is mandatory and shall be as follows:

- a. In the case of offers made through the Division of Employment Security or manpower agencies, the determination of whether the offer was bona fide or whether there was good cause for rejecting it must be made by the DES worker.

In the case of offers made directly by an employer, the determination of whether the offer was bona fide or whether there was good cause for rejecting it must be made by the eligibility worker in accordance with the provisions of section 504.440 (E)(1).
- b. Employment, or a bona fide offer of employment below the applicable federal or state minimum wage level, shall be verified by a signed and dated statement from the employee or prospective employee, or by a collateral contact with the prospective employer.
- c. Travel to and from work in excess of two hours of round trip time, or 2 miles where walking is the only means of travel, shall be verified by a signed and dated statement to that effect from the individual, and by a collateral contact with an appropriate transportation official, if public transportation is used.
- d. Specific job responsibilities that the individual is physically incapable of performing shall be verified by a written statement signed by a competent medical authority, as defined in accordance with section 501.500(J).
- e. Conditions of employment which violate health and safety standards shall be verified by a written statement from the appropriate local or state enforcement agency or board.
- f. The unavailability of Workmen's Compensation shall be verified by the written statement of the employer or the appropriate federal or state agency or board.

504.500: SSI-Related Programs

Aged and disabled individuals shall establish eligibility for Medical Assistance as SSI-Related assistance units if they meet the requirements of one of the following programs:

- (A) the SSI Program (recipients);
- (B) the MA-Old Age Assistance Program;
- (C) the MA-Disability Assistance Program;
- (D) the Pickle Amendment Provisions; and
- (E) the Massachusetts Rehabilitation Commission-Personal Care Attendant Provisions.

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Persons who have met basic, categorical, and financial requirements under the Supplemental Security Income (SSI) Program are not required to make separate application for prospective Medical Assistance. However, if retroactive coverage is required, a separate application for retroactive Medical Assistance must be filed within one month of the receipt of notice of approval for SSI.

SSI eligibility is determined by the Social Security Administration. The following persons qualify for Medical Assistance on the basis of current SSI eligibility:

- (A) persons currently receiving SSI benefits; and
- (B) the spouse of a recipient of SSI, or MA-Related to SSI, who was eligible for MA in December, 1973, as a spouse essential to care, will remain eligible for MA provided:
 - (1) the recipient with whom the essential spouse lives continues to meet the December, 1973 Old Age Assistance and Disability Assistance eligibility standards; and
 - (2) the spouse continues to live with the recipient as a spouse and remains essential to the care of the recipient and has no other income of his own.

504.520: SSI-Related: MA-Old Age Assistance

Individuals aged 65 or older shall establish eligibility for Medical Assistance by making a separate application for the MA-OAA (Medical Assistance-Old Age Assistance) Program.

Aged adults who may establish eligibility for MA-OAA include adults who would be eligible for SSI, except for factors such as the following:

- (A) the filing unit's total net income exceeds the SSI income limitation;
- (B) the filing unit's total countable assets exceed the SSI asset limitation; or
- (C) the applicant chooses not to apply or complete the application process for SSI eligibility.

504.530: SSI-Related: MA-Disability Assistance

Individuals who meet SSI disability requirements shall establish eligibility for Medical Assistance by making a separate application for MA-DA (Medical Assistance-Disability Assistance).

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Disabled individuals who may establish eligibility for MA-DA include persons who would be eligible for SSI except for factors such as the following:

- (A) the filing unit's total net income exceeds the SSI income limitation;
- (B) the filing unit's total countable assets exceed the SSI asset limitation.
- (C) the disabled applicant, diagnosed as a drug addict or alcoholic, has refused to accept the SSI Program's referral for treatment at an appropriate facility; or
- (D) the applicant chooses not to apply or complete the application process for SSI eligibility.

Cross-reference: see section 501.230(C)(1).

504.540: SSI-Related: Pickle Amendment Cases

Individuals determined to be ineligible for Supplemental Security Income benefits after April, 1977, may nevertheless be eligible for MA under certain circumstances.

Under the Pickle Amendment, former SSI recipients are entitled to receive Medical Assistance for any month in which they would be eligible for SSI but for the amount of any RSDI cost-of-living increases received since the last month in which SSI benefits were received.

504.550: SSI-Related: Massachusetts Rehabilitation Commission-Personal Care Attendant Cases

An individual who is receiving at least 14 hours per week of Personal Care Attendant (PCA) services, provided and paid for by the Massachusetts Rehabilitation Commission (MRC), shall be eligible for Medical Assistance without regard to the SSI-Related financial or categorical eligibility requirements.

Eligibility for the PCA Program is determined by the MRC.

Verification that an individual is receiving PCA services is mandatory and shall be a statement from the Massachusetts Rehabilitation Commission.

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504.600: Age (65 or Older)(A) Requirements

As a condition of eligibility for MA-OAA, the individual shall be age 65 years or older.

(B) Verifications

Verification of age is mandatory. Age shall be verified by one of the following:

- (1) birth certificate; or
- (2) hospital birth record.

If none of the above documents is available, two of the following may be accepted, provided they both contain date of birth:

- a. family bible or genealogical records;
- b. baptismal certificate;
- c. insurance policies;
- d. United States census records;
- e. Social Security (RSDI) benefit records;
- f. Immigration and Naturalization records.
- g. employment records;
- h. newspaper records and local histories;
- i. Indian agency records;
- j. voluntary social service records;
- k. church records;
- l. passport record;
- m. other governmental records; or

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- n. an affidavit of a knowledgeable third person, if the applicant or recipient has demonstrated that he has tried unsuccessfully to obtain appropriate documents.

504.700: Permanent and Total Disability

(A) Requirements

As a condition of eligibility for MA-DA, the individual must be permanently and totally disabled as defined in section 501.500(II).

(B) Verifications

Verification of permanent and total disability for individuals under 65 is mandatory and shall be one of the following:

- (1) a document from the Social Security Administration certifying eligibility or receipt of Social Security Disability Benefits (RSDI); or
- (2) a document from the SMRT certifying that the individual is disabled.

The applicant or recipient shall cooperate with the worker to obtain any medical information or records required by the SMRT.

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In addition to meeting basic and categorical requirements, all Medical Assistance applicants and recipients must meet certain financial eligibility requirements.

Unless specifically stated, the requirements of this section apply to both AFDC-Related and SSI-Related filing units.

505.100: Countable and Non-Countable Assets

Countable assets are all assets that are considered for eligibility determination. Non-countable assets are all assets that are exempt from consideration. All assets are considered countable unless exempted herein. Assets must be distinguished from income as defined in section 505.200.

505.110: Asset Limitation

The total value of countable assets owned by, or available to, persons in the filing unit may not exceed the following:

1 Person	\$2,000
2 Persons	\$3,000
Each Additional Person	\$ 100

505.120: Applicant's Transfer of Assets(A) Requirements

- (1) Medical Assistance shall not be granted to an applicant, who at any time within two years immediately prior to the filing of an application for Medical Assistance, has made an assignment or transfer of real or personal property for the purpose of rendering himself eligible for such assistance, except as provided in Massachusetts General Laws, ch. 118E, §13, or except as provided in this section.

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- (2) Eligibility for Medical Assistance shall be denied when the Department determines that one significant purpose of the transfer was to render the applicant eligible for Medical Assistance. The Department has the responsibility of demonstrating that the applicant had the specific fraudulent intent to render himself eligible for Medical Assistance at the time of the transfer. The Department shall base its determination on whether the applicant had retained sufficient resources after the transfer was completed to provide for his support and medical care by considering such factors as the applicant's age, health, and life expectancy. If the Department determines that an applicant retained insufficient resources after the transfer was completed, it shall further investigate the circumstances of the transfer, including the applicant's knowledge of the Medical Assistance program, to ascertain the applicant's intent.
- (3) In the following situations the Department shall not inquire into the applicant's intent, and a transfer of real or personal property will not affect the applicant's eligibility for Medical Assistance:
- a. When the applicant's total countable assets, including the equity value of the property transferred, is less than the allowable resource limit for the family size. The value of the property at the time of the transfer is used to make this determination.
 - b. The applicant received adequate consideration for the value of the property transferred. The value of the property at the time of the transfer is used to make this determination. Adequate consideration includes:
 1. A transfer made to satisfy a legally enforceable debt; or,
 2. A transfer made to reimburse someone other than a legally responsible person for care or benefits provided on the understanding that reimbursement would be made by an applicant. If a transfer is made to reimburse a spouse, child, parent or other legally responsible person, the Department shall make a determination concerning the applicant's intent in accordance with the standards of paragraph (2).

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- (4) In any case, an applicant shall not be disqualified from assistance if he incurs medical bills, for which he is liable, equal to his equity in the transferred property.

This section shall not apply to a woman in the first two trimesters of pregnancy who meets the financial eligibility criteria of the Aid to Families with Dependent Children Program located at 106 CMR 304.

(B) Verifications

For purposes of subsection (A)(4) above, the verification of medical bills incurred is mandatory. The only sources of verification are cancelled checks, hospital records and/or doctors' bills.

505.130: Recipient's Receipt of Property

A recipient who by gift, inheritance, or other manner, acquires additional assets during his period of eligibility, shall report within 10 calendar days such acquisition for a reevaluation of his eligibility.

A recipient may assign assets to the Department if the total expenditures made in his behalf equal the amount assigned. Assignment shall be made on the form prescribed by the Department.

505.140: Joint Ownership of Assets

(A) Requirements

(1) AFDC-Related Filing Units

Assets owned exclusively by a member of the filing unit are counted in their entirety when determining eligibility for Medical Assistance.

Assets owned jointly by two or more persons are considered to be owned in equal shares unless a different distribution is verified. If joint ownership exists, only that portion of the asset owned by members of the filing unit is counted when determining eligibility for Medical Assistance.

(2) SSI-Related Filing Units

Assets owned exclusively by a member of the filing unit are counted in their entirety when determining eligibility for Medical Assistance.

When assets are owned jointly by an applicant or recipient and one or more individuals, all funds are considered a resource to the applicant or recipient regardless of their original source if he has the legal ability to make the funds available.

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For purposes of this subsection, a husband and wife may have joint assets of \$3,000.

(B) Verifications

Verification of joint ownership is mandatory and shall be one of the following:

- (1) title;
- (2) purchase contract;
- (3) bank statements;
- (4) certificate of ownership; or
- (5) other documentation that indicates joint ownership.

505.150: Inaccessible Assets

(A) Requirements

An inaccessible asset is an asset to which the individual has no ready access and is not counted when determining eligibility for Medical Assistance. Inaccessible assets include, but are not limited to, property the ownership of which is the subject of legal proceedings (e.g., probate, divorce suits, etc.); and the cash surrender value of life insurance policies when the policy has been assigned to the issuing company for adjustment.

(B) Verifications

The verification of the inaccessibility of an asset is mandatory and shall be a copy of the original legal instrument. If a copy of the original legal instrument is not available, inaccessibility can be verified by relevant legal or financial statements that document the inaccessible amount.

505.160: Countable Assets

Countable assets are all assets that must be considered in the determination of the total value of assets.

The following assets shall be taken into consideration in determining total countable assets:

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(A) Cash(1) Requirements

Cash is currency or negotiable instruments in the physical possession of the individual, or held for that individual by another (e.g., checks, drafts, government notes, bank notes, etc.).

(2) Verification

Verification of the amount of cash is required only when questionable. The only acceptable source of verification is the physical display of the currency or negotiable instrument.

(B) Bank Deposits(1) Requirements

Bank deposits are deposits of any kind in a bank, savings and loan institution, or credit union. Bank deposits may be in the form of savings, checking or trust accounts, term certificates, or certificates of deposit.

(2) Verifications

The verification of each amount on deposit is mandatory and shall be one of the following:

- a. a current statement from the bank or financial institution showing the account activity for the 24 months immediately preceding the application or redetermination; or
- b. a teller-completed savings passbook showing the activity of the preceding 24 months.

(C) Personal Needs Allowance (PNA) Account(1) Requirements

The amount of this account is a countable asset.

(2) Verification

The verification of the amount in the PNA account is mandatory and shall be a statement from the bank or facility where the account is maintained.

(D) Securities(1) Requirements

Stocks, bonds, debentures, options, futures contracts, mutual and money market fund shares, or promissory and corporate notes all are countable assets. Tradeable securities shall be valued at their most recent closing price at the time of verification. Non-tradeable securities shall be valued at their equity value.

A security for which there is no market shall be non-countable.

(2) Verifications

The verification of the value of each security is mandatory and shall be one of the following:

- a. the most recent market quotation;
- b. the current quotation from a licensed stockbroker;
- c. documentation from a bank; or
- d. the issuing corporation's document of equity value.

A claim that a particular security is inaccessible shall be verified in accordance with section 505.150(B).

(E) Cash Surrender Value of Life Insurance Policies(1) Requirements

The cash surrender value of a life insurance policy is the amount, if any, that the issuing company has agreed to pay the owner of the policy upon its cancellation.

Except as provided herein, the cash surrender value of a life insurance policy shall be a countable asset.

An individual may adjust the cash surrender value of a life insurance policy in order to meet the asset limitation. The Department shall consider the cash surrender value amount an inaccessible asset during the adjustment period.

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a. AFDC-Related Filing Units

If the total face value of all life insurance policies held by an AFDC-Related filing unit exceeds \$2,000, the total cash surrender value in excess of \$1,000 shall be countable.

b. SSI-Related Filing Units

If the total face value of all life insurance policies held by any member of the filing unit exceeds \$1,500, the total cash surrender value of all policies held by that person shall be countable.

(2) Verifications

The verification of the face and cash surrender values of all life insurance policies is mandatory and shall be statements from the issuing company.

(F) Automobiles(1) Requirements

One automobile per filing unit is non-countable. All other automobiles shall be counted at their equity value.

The equity value of an automobile is the fair market value less the balance of the loan and/or other legal encumbrances, if any, for the purchase of the automobile.

The exempt automobile shall be the one selected by the filing unit.

(2) Verifications

The verification of the equity value of all countable automobiles is mandatory and shall be the average retail price listed in the NADA valuation book (blue book) minus the balance of outstanding loans, or other legal encumbrances, if any.

If the vehicle is not listed in the NADA valuation book, the current value shall be determined by obtaining two estimates of the current fair market value from reputable automobile or recreational vehicle dealers. The average of the two estimates shall be the fair market value.

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The verification of the outstanding loan is mandatory and shall be one of the following:

- a. a loan instrument and statement from the bank or financial institution specifying the balance due; or
- b. a loan instrument and a statement from the lender specifying the balance due.

(G) Recreational Vehicles

(1) Requirements

A recreational vehicle is a vehicle used primarily for recreational purposes, such as: snowmobiles, boats, trailers, jeeps, vans and motorcycles.

All recreational vehicles are counted at equity value except that one such vehicle may be exempt if it is the sole means of transportation for the filing unit.

(2) Verification

The verification of the equity value of a recreational vehicle is mandatory and shall be the same as that for an automobile.

(H) Real Estate (Other than the Home Used as Principal Residence)

(1) Requirements

All real estate, other than a home as provided in section 505.170(M), is an asset. With the exception of rental property used for self-support, the value of such real estate is non-countable for six months to allow for its disposal.

The equity value of real estate that has not been liquidated at the end of the sixth month shall be a countable asset, and eligibility shall be redetermined. The total proceeds from a sale are considered a countable asset in the month received, and in subsequent months.

(2) Verifications

- a. The verification of the equity value of real estate is mandatory. Two items must be verified to determine equity value: fair market value and the balance owed on a loan or mortgage, if any.

Fair market value shall be verified by the written appraisals of two separate and independent licensed and local real estate appraisers. The average of these two appraisals shall be the fair market value.

The mandatory verification of the balance owed on a loan or mortgage shall be one of the following:

1. a loan instrument and statement from the bank or finance institution specifying the balance due; or
 2. a loan instrument and statement from the lender specifying the balance due.
- b. The verification of the proceeds from the sale of real estate is mandatory. The preferred sources of verification are the settlement statement from the law firm or title company negotiating the settlement.

505.170: Non-Countable Assets

Non-countable assets are those assets exempted from consideration in the determination of the total value of assets.

In addition to the non-countable assets listed in sections 505.150 and 505.160, the following assets are non-countable for purposes of Medical Assistance eligibility:

- (A) the assets of any member of the household who is an AFDC or SSI recipient;
- (B) household belongings such as furniture, appliances, decorations, linens, and cookware;
- (C) personal belongings, such as jewelry, books, and toys;
- (D) home produce grown and/or preserved by the filing unit;
- (E) the value of food stamps;
- (F) lands held in trust for Native Americans;
- (G) stock held in a regional or village corporation for a native of Alaska pursuant to the Alaska Native Claims Settlement Act;
- (H) proceeds from the sale of a home, proceeds from insurance coverage of a destroyed home, for six months beginning with the month of receipt, if the proceeds are to be used for the purchase of another home or to be used as the primary residence;
- (I) business and non-business property essential to self-support in a verified SSA-approved self-support plan, for an SSI-Related filing unit;
- (J) HUD settlement payments that can be verified as having been made under Section 236 of the National Housing Act provided these payments are conserved in a separate account, in an SSI-Related filing unit;

- (K) 30 and 1/3 of countable earned income subject to the provisions of section 506.120;
- (L) the total amount of any grant or loan to an undergraduate student for educational purposes made or insured under any program administered by the U.S. Commissioner of Education; and
- (M) the home of an applicant or recipient used as the principal place of residence.

505.200: Income

Income is all monies including recurrent payments, payments in-kind, or lump sum payments. All such monies and payments are considered income to the filing unit in the calendar month actually received and an asset in subsequent months.

Countable income is all monies, earned or unearned, that are considered for eligibility determination.

Non-countable income is all monies that are exempt from consideration.

All income shall be countable unless exempted herein.

505.210: Countable Earned Income

Earned income is compensation received for services performed as an employee. With respect to self-employment, earned income is the total gross income less the cost of doing business.

(A) Income from Employment(1) Requirements

All income from employment including wages, salaries, tips, fees, commissions, severance pay, or other compensation, such as income-in-kind, is countable.

(2) Verifications

The verification of income from employment is mandatory and shall be one or more of the following:

- a. a written statement signed by an employer;
- b. salary statements;
- c. paycheck stubs; or
- d. copies of payment checks.

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Documentation shall be current and shall include income information from the preceding five consecutive weeks.

(B) Income from Self-Employment

(1) Requirements

A person who directly controls the goods produced or services provided, the work undertaken, and the fees and charges assessed, is self-employed.

Earned income from self-employment is the total gross income minus the cost of doing business. The cost of doing business includes all costs necessary to maintain the business. Personal expenses, such as lunches and transportation to and from work, are not included.

(2) Verifications

a. Verification of total gross income for the 12 most recent months is mandatory and shall be one of the following:

1. tax returns;
2. bank statements;
3. accounting records, certified and signed by a public accountant; or
4. other appropriate documents.

b. The verification of each business expense claimed is mandatory and shall be one of the following:

1. records of wages paid to the employee;
2. rent receipts;
3. utility receipts;
4. receipts for purchase of inventory;
5. property taxes; or
6. other appropriate documents.

(C) Income from Real Estate

(1) Requirements

Rental income is income from a rented house or apartment owned by a member of the MA filing unit. This income is countable and may be earned or unearned. The income is considered earned if such rental income is received in the course of a trade or business as a real estate dealer.

A real estate dealer is one engaged in the business of selling real estate to customers for profit. One who holds real estate for investment or speculation, and receives rental income, is not a real estate dealer.

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Business expenses which may be allowed include carrying charges, costs of fuel and utilities provided to tenants, and any maintenance and repair costs.

If the individual occupies an apartment in the same building from which he receives rental income, carrying charges are prorated per unit. The cost of fuel and utilities are prorated if they are paid through a single heating unit or meter.

Actual maintenance and repair costs, other than cosmetic changes, may be deducted from the amount of rental income if the individual verifies such expenses.

(2) Verifications

- a. The verification of rental income is mandatory and shall be one of the following:
 1. tax records;
 2. leases; or
 3. rental agency documents.
- b. The verification of any claimed business expense is mandatory and shall be one of the following for the most recent 12 months:
 1. current tax bill less abatement;
 2. records of betterment taxes;
 3. lender documents showing interest and principal payments on the mortgage;
 4. records of insurance premiums;
 5. utility bills;
 6. refuse collection bills;
 7. necessary repair bills (for non-cosmetic purposes); or
 8. other appropriate documents.

(D) Income from Roomers and Boarders

(1) Requirements

Payment for room and/or meals received from anyone other than a member of the filing unit or a child of the grantee relative is countable earned income. Income from roomers and boarders is the amount received from the roomer or boarder, less a standard deduction allowed for business expenses. When the income is for the rental of a room only, the business expense allowed is 25 percent of the income. When the income is for both a room and meals, the business expense allowed is 75 percent of the income. Actual expenses are allowed only if the provider can document that they exceed these standard deductions.

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The verification of income from roomers and boarders is mandatory and shall be one of the following:

- a. a copy of the written agreement signed by both parties indicating the amount and frequency of payment; or
- b. a signed statement from the person making the payment indicating the amount and frequency of payment.

If the individual claims that actual expenses exceed the standard deduction, verification shall consist of receipts documenting actual expenses.

505.220: Countable Unearned Income

Unearned income is income received by an individual, not as the direct result of his own labor or services. Unless specifically excluded by section 505.230, unearned income, including the following, is countable:

(A) Income from Benefit Payments(1) Requirements

All recurring income received from public or private organizations for purposes of personal maintenance shall be countable, including, but not limited to, Social Security benefits, pensions and annuities, Veteran's benefits, state veteran's benefits in AFDC-Related cases only, Railroad Retirement, Black Lung benefits, Brown Lung benefits, Worker's Compensation and Unemployment Compensation Insurance benefits, Armed Forces benefits and striker's benefits.

(2) Verifications

The verification of income from benefit payments is mandatory and shall be one of the following:

- a. benefit award letters;

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- b. retirement fund documents indicating the amount and frequency of benefits;
- c. Social Security benefits statements;
- d. a statement from the agency or organization making the payments, indicating the amount and frequency of benefits; or
- e. copies of benefit payment checks.

(B) Contribution and Support Payments(1) Requirements

Regular contributions from friends and relatives are countable income. Alimony and child support payments from legally responsible relatives are countable income.

Contribution and payment amounts are counted in full when received by AFDC-Related individuals. Only two-thirds of child support payments are countable income when paid on behalf of an SSI-Related child, while alimony payments and contributions from friends and relatives are countable in full.

(2) Verifications

The verification of contributions and support payments is mandatory. The preferred sources of verification are:

- a. copies of the cancelled checks or money orders; or
- b. the court payment record;

(C) Income from Investments(1) Requirements

Investment income, such as dividends, interest, and royalties, shall be countable.

(2) Verifications

The verification of investment income is mandatory and shall be a statement from a financial institution, broker or

investment firm indicating the amount of interest or dividend paid, the frequency of payment and the amount paid year-to-date.

(D) Income-In-Kind

Income-in-kind is income in any kind other than cash provided to the applicant or recipient. It may consist of free services, free rent, free utilities, clothing, or food, but it is not necessarily limited to these. It may be earned or unearned.

(1) Requirements

Income-in-kind shall be countable and its value shall be determined from the following table. The value of income-in-kind not listed below shall be the fair market value of goods or services received.

TABLE OF VALUES FOR INCOME-IN-KIND

Income-In-Kind	Value
Shelter: Unheated Facility	\$102.00 per month per household
Shelter: Heated Facility	\$126.30 per month per household
Fuel	\$ 27.90 per month per household
Utilities	\$ 18.60 per month per household
Food	\$ 41.80 per month per individual

(2) Verifications

The verification of the value of income-in-kind, not listed above, is mandatory and shall be one of the following:

- a. a written statement from the person contributing the goods or services; or
- b. receipts verifying the actual value of in-kind income.

(E) Income from Real Estate (Unearned)

(1) Requirements

Rental income is income from a rented house or apartment owned by a member of the MA filing unit. This income is countable and may be earned or unearned. Income is considered unearned if the individual is not in the trade or business as a real estate dealer.

A real estate dealer is one engaged in the business of selling real estate to customers for profit. One who holds real estate for investment or speculation, and receives rental income, is not a real estate dealer.

Business expenses which may be allowed include carrying charges, costs of fuel and utilities provided to tenants, maintenance and repair costs, and fees paid to a rental agent, resident manager or other person or agency.

If the individual occupies an apartment in the same building from which he receives rental income, carrying charges are prorated per unit. The cost of fuel and utilities are prorated equally if they are paid through a single heating unit or meter.

Actual maintenance and repair costs, other than cosmetic changes, may be deducted from the amount of rental income received if the individual verifies such expenses.

(2) Verifications

Verifications of rental income and business expenses are mandatory. The preferred source of verification of income is one of the following:

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- (a) tax records;
- (b) leases; or
- (c) rental agency documents.

The preferred source of verification of business expenses is any of the following, where applicable:

1. current tax bill showing abatement, if any;
2. contract with a rental agency, resident manager or other person or agency showing management fee paid;
3. records of betterment tax bills;
4. lender documents showing interest and principal payments on the mortgage;
5. records of insurance premiums;
6. utility bills;
7. refuse collection bills; or
8. necessary repair bills (for non-cosmetic purposes).

Unless the individual can demonstrate that the previous year's income and business expenses are unrepresentative of future income and business expenses, both income and expenses must be verified for the preceding 12 months.

(F) Lump Sum Payments

(1) Requirements

A lump sum payment is a one time only payment that represents either the accumulation of recurring income such as retroactive Social Security (RSDI), Unemployment Compensation, Railroad Retirement or Federal VA benefits; or windfall payments such as inheritances or legacies.

Except in the three situations specified below, lump sum payments are counted as unearned income in the calendar month received and as an asset in subsequent months:

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1. proceeds from the sale of a home or from insurance coverage on a destroyed home subject to the provisions of section 505.160(H);
2. proceeds from the sale of real estate other than a home subject to the provisions of section 505.160(H);
3. Earned Income Credit (EIC) lump sum payments.

(2) Verifications

The verification of a lump sum payment is mandatory and shall be one of the following:

- a. a benefit or settlement award letter;
- b. a retirement fund document indicating the amount of the lump sum payment;
- c. a written statement from the agency, company or institution making the payment; or
- d. a copy of the payment document.

(G) Life Insurance Proceeds

(1) Requirements

Life insurance proceeds are proceeds received by the beneficiary of a life insurance policy as a result of the death of the insured. The countable portion of these proceeds is countable income in the month received and is considered an asset in subsequent months.

a. AFDC-Related Filing Units

The total amount of life insurance proceeds is countable income.

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The amount of life insurance proceeds that exceeds either \$1,500 or the amount expended by the beneficiary of the policy on the cost of the insured individual's last illness and burial, whichever is less, is countable income.

(2) Verifications

Verification of both the life insurance proceeds and medical and burial expenses shall be mandatory.

- a. The mandatory verification of life insurance proceeds shall be a statement from the insurance carrier or agent.
- b. The mandatory verification of the medical and burial expenses shall be the following:
 1. hospital records and/or doctors' bills; and
 2. funeral home receipts, and/or cemetery or interment bills.

505.230: Non-Countable Income

Non-countable income is all monies exempted from consideration in the determination of total income. The following are non-countable for purposes of Medical Assistance eligibility:

- (A) the income of any member of the filing unit who is an AFDC, GR, Pickle or SSI recipient;
- (B) income received on an irregular or infrequent basis and totaling less than \$40 per month for AFDC-Related cases, and less than \$60 unearned or \$30 earned per quarter for SSI-Related cases;
- (C) payments under the Nutrition Program for the Elderly (Title VII of the Older American Act of 1965);

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- (D) Social Security (RSDI) benefits paid to persons 18 through 21 years of age who are full-time students, in a AFDC-Related filing unit;
- (E) the first \$1200 of quarterly earned income, not to exceed \$1620 in a calendar year, of a student 21 years of age and under who is not married or the head of a household, in a SSI-Related filing unit;
- (F) all earnings of children under 14;
- (G) expense allowances and weekly incentive payments of up to \$30 from the Division of Employment Security;
- (H) training allowances under CETA and reimbursement for training-related expenses;
- (I) payments received under CETA Youth Employment Demonstration Programs;
- (J) incentive payments of \$30 per week or less received under a vocational rehabilitation program of the Massachusetts Rehabilitation Commission;
- (K) the tuition and fee portions of grants, scholarships, fellowships, and other student aid payments;
- (L) the total amount of any grant or loan to an undergraduate student for educational purposes made or insured under any program administered by the U.S. Commissioner of Education;
- (M) payments or reimbursements to volunteers serving as foster grandparents, senior health aides, senior companions, or serving in the Service Corps of Retired Executives, or in any other Program established under the Domestic Service Act of 1973, provided the volunteer was a recipient of public assistance upon entering the volunteer program;

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- (N) funds distributed to, or held in trust for, members of any Indian tribe pursuant to a judgment of the Indian Claims Commission of the Court of Claims;
- (O) the tax-exempt portions of payments made under the Alaska Native Claims Settlement Act;
- (P) payments to Native Americans under Public Law 94-114;
- (Q) housing subsidies received under any Massachusetts or federal housing program;
- (R) experimental Housing Allowance Program payments made under contracts entered into prior to 1975;
- (S) relocation payments made by federal, state, or other agencies completing public projects with federal or state assistance;
- (T) Disaster Relief Assistance payments;
- (U) payments for the foster care of a child if the child was placed in the applicant's or recipient's home by a public or private non-profit child placement or child care agency;
- (V) payments for a room and/or meals from a child of the grantee-relative, in a AFDC-Related filing unit;
- (W) The total amount of Social Security cost-of-living increases pursuant to section 504.540;
- (X) earned or unearned income needed to fulfill an SSA-approved self-support plan, for a SSI-Related individual;
- (Y) one-third of a child support payment received by a SSI-Related child from an absent parent;
- (Z) the value of food stamps;
- (AA) the value of assistance received under the Child Nutrition Act of 1966 and the National School Lunch Act; and
- (BB) work-study income of undergraduate students in AFDC-Related units.

505.300: The Budget Period

The budget period is a six (6) month prospective period which starts on the first day of the month of application on which the applicant would have been eligible, or on the date of service of the first bill which the recipient wishes to have covered by MA. This date must not be earlier than three (3) months prior to the month of application.

505.310: Adjustments to the Budget Period

Income determination for prospective eligibility in cases involving self-employment, irregular income, and reduction or termination of employment shall be as follows:

- (A) self-employment income is averaged for the 12-month period preceding the date of application or redetermination;
- (B) seasonal employment income is based on actual earnings in the most recent earning season;
- (C) irregular actual income is averaged over a period of 3 months;
- (D) reduced or terminated employment income is based on the anticipated termination date as verified in writing by the employer.

505.320: Conversions to Monthly Amounts

Income which is received on other than a monthly basis shall be converted to a monthly amount before being used in eligibility calculations, as follows:

- (A) if the employee is paid weekly, the average of the last five weeks' pay shall be multiplied by $4 \frac{1}{3}$ or 4.333 to obtain an anticipated monthly wage. If the applicant or recipient has worked less than five weeks, the wage information available shall be used initially and the figure revised, if necessary, when five weeks' wage information is available.
- (B) if the employee is paid bi-weekly, an average of the last two consecutive pay periods shall be multiplied by $2 \frac{1}{6}$ or 2.167 to obtain a monthly figure. If the employee is paid twice a month, the last two consecutive pay periods shall be added to obtain a monthly figure.

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- (C) If the employee in either of the cases above has some payroll deductions which are made on other than a weekly, bi-weekly or semi-monthly basis (e.g. monthly), these may be verified by means of any pay stub from the past five weeks which lists the deductions or by a letter from the employer. Such deductions must be converted to monthly amounts and must be included in determination of the employee's work-related expenses.

If the applicant or recipient has worked less than four weeks, the wage information available shall be used initially and the figure revised, if necessary, when two consecutive pay periods wage information is available.

- (D) If the employee is paid monthly the monthly figure shall be used.
- (E) If the employee receives a contractual annual salary, the amount to be used is the contractual annual salary divided by 12. Verification of the annual salary should be obtained in the form of a copy of the contract or a letter stating the annual salary to be received.
- (F) Pay stubs or a statement showing wages paid in the year-to-date may be used to determine an anticipated monthly wage provided the number of weeks' pay represented is shown or can be computed. The average weekly earnings derived are multiplied by $4 \frac{1}{3}$ or 4.333 to obtain a monthly figure.

505.400: Financial Responsibility

Certain individuals have the option of being included in the assistance unit. If they so choose, they must also be included in the filing unit. Other individuals are ineligible for consideration in the assistance unit yet have financial responsibility for those in the assistance unit and must therefore be included in the filing unit.

The assets and income of all members of the filing unit shall be considered when determining eligibility.

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505.410: Natural and Adoptive Parents(A) Financial Responsibility

A parent, whether natural or adoptive, has the financial responsibility for the support of his children, unless emancipated.

(1) Children Residing with Parents

When children under 21 and not emancipated, reside with parents the assets and income of the parents are considered available whether or not actually contributed.

When SSI-Related children under age 18 or SSI-Related children under age 21 who are regularly attending a school, college or university or receiving technical training to prepare them for gainful employment reside with parents the assets and income of the parents are considered available whether or not actually contributed.

(2) Children Residing Apart from Parents

When parents, and children age 18 or over, or emancipated, do not reside together, the assets and income of parents are considered available for the calendar month of separation.

(3) Children in Long-Term Care Facilities

When children under the age of 21 reside in a long-term care facility, the income and assets of the parents are considered mutually available through the end of the calendar month of separation.

(B) Inclusion of the Assistance Unit

When dependent children reside with parents, the parents are included in the assistance unit in the MA-AFDC Program.

The parents of children applying for assistance under the MA-Under 21 Program may not be included in the assistance unit, unless they, too, are under the age of 21, but must be included in the filing unit.

505.420: Grantee-Relatives Other Than Parents(A) Financial Responsibility

A grantee-relative, other than a parent, does not have financial responsibility for a dependent child, and is not included in the filing unit unless he wishes assistance for himself.

(B) Inclusion in the Assistance Unit

A grantee-relative who is not the parent of a dependent child, and the spouse of the grantee-relative, have the option of being included in the assistance unit, provided they meet the basic, categorical and financial eligibility requirements.

If the grantee-relative and his spouse elect to be included, their assets and income are counted in determining financial eligibility of the assistance unit. If the grantee-relative and his spouse do not elect to be included, their assets and income are not counted and they are not included in the assistance unit or the filing unit.

505.430: Recipients of Supplemental Security Income (SSI)(A) Financial Responsibility

The assets and income of recipients of SSI shall not be considered available to applicants or recipients of Medical Assistance, regardless of relationship.

(B) Inclusion in the Assistance Unit

Recipients of SSI receive automatic eligibility for Medical Assistance and are not included in the assistance unit applying separately for Medical Assistance.

A parent or grantee-relative (and his spouse) of a child receiving SSI may establish categorical eligibility for the MA-AFDC Program on the basis of the SSI child when there is no other dependent child in the home. The child is excluded from the assistance unit and the filing unit.

505.440: Stepparents(A) Financial Responsibility

When the natural or adoptive parent of a child remarries, the assets and income of the stepparent are available to the spouse. The stepparent does not have financial responsibility to the child unless adopted.

(B) Inclusion in the Assistance Unit

The stepparent has the option of being included in the assistance unit provided basic and financial eligibility requirements are met. If the stepparent elects to be included, the stepparent's assets and income shall be considered.

If the stepparent elects not to be included, the amount of the stepparent's financial responsibility to the natural parent shall be determined in accordance with section 506.300.

505.450: Spouses(A) Financial Responsibility

Each spouse has financial responsibility for the other.

(1) Spouses Residing Together

When spouses reside together, either in the community or in the same room in a long-term care facility, the assets and income of each spouse are considered mutually available, whether or not actually contributed. In AFDC-Related assistance units, the income and assets are considered available only for the days actually lived together (with the exception of court-ordered payments and certain legal and contractual arrangements).

(2) Spouses Residing Aparta. Related Assistance Unit

In an AFDC-Related assistance unit, the assets and income of spouses who do not reside together because one spouse has entered a long-term care facility or is on Administrative Days are considered mutually available through the end of the calendar month of separation.

b. SSI-Related Assistance Unit

If both spouses are applicants for or recipients of Medical Assistance and do not reside together, their assets and income are considered mutually available for the first six months after the month of separation.

If only one spouse is an applicant for or recipient of Medical Assistance, and they do not reside together because the spouse is in a long-term care facility or on Administrative Days, their assets and income are considered mutually available through the end of the calendar month of separation.

After such periods, only income and assets actually contributed by one spouse to the other are considered available.

(B) Inclusion in the Assistance Unit

The spouse of a recipient of Medical Assistance may be included in the assistance unit only if all applicable basic, categorical, and financial requirements are met.

505.460: Selection of the Assistance Unit

Under certain circumstances, an individual or family may be considered for eligibility in more than one assistance unit or category of assistance (i.e., AFDC-Related, SSI-Related, and/or MA-Under 21.)

The individual or family may select the composition and categorical relatedness of the assistance unit for which he wants to be considered, and the worker shall explain the options available to him.

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CALCULATION OF FINANCIAL ELIGIBILITYTABLE OF CONTENTSSECTION

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MEDICAL ASSISTANCE
CALCULATION OF FINANCIAL ELIGIBILITY506.000: Overview of Calculation of Financial Eligibility

Financial eligibility is determined by comparing the net countable income and assets available to persons in the assistance unit with the asset limitation and income standards established by the Department.

506.100: Income Deductions: Community Cases

The following income deductions are allowed for Community cases: Unearned, Earned, and General.

506.110: Unearned Income Deductions: Community Cases

SSI-Related community cases are allowed an unearned income deduction of \$20 per individual or married couple. If one spouse resides in a long-term care facility, this deduction is applied only to the income of the spouse residing in the community. In filing units with a disabled child(ren), income deemed to each disabled child(ren) is also subject to a \$20 disregard.

If total unearned income of an individual or couple residing in the community is less than \$20, any remaining portion of this deduction shall be applied to earned income. If there is no unearned income, the entire \$20 shall be deducted from earned income in accordance with section 506.120.

Unearned income deductions are not allowed to AFDC-Related filing units or to individuals in long-term care facilities.

506.120: Earned Income Deductions: Community Cases(A) AFDC-Related Filing Units(1) Work-Related Expenses

- a. In AFDC-Related Community cases, each member of the filing unit who is employed full or part-time, is entitled to a work-related expense deduction.

Each member of the filing unit who is employed full-time is entitled to a \$75 monthly deduction from gross wages. However, employment of 30 hours or less a week shall not be considered full-time. Each member of the filing unit who is employed 30 hours or less a week shall receive a proportionate share of the \$75 deduction in accordance with the following standards:

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<u>WEEKLY HOURS</u>	<u>MONTHLY HOURS</u>	<u>MAXIMUM DEDUCTION</u>
1 - 10	1 - 43	\$18.75
11 - 20	44 - 87	\$37.50
21 - 30	88 - 130	\$56.25
31 - above	131 - above	\$75.00

b. Restrictions

This disregard does not apply to the earned income of a member of the filing unit for the month in which one of the following conditions exist: (1) The member of the filing unit has reduced his income, terminated his employment or refused a bona fide job offer without good cause. See section 504.440(D): Bona Fide Offer and Good Cause; or (2) the member of the filing unit has failed without good cause to make a timely report of income received. Good Cause for failure to make a timely report of a change of circumstances shall be limited to demonstrated serious illness. See Section 502.320(A): Responsibility for Reporting Changes in Circumstances.

The work-related expense deduction shall not be applied to rental, roomer or boarder income.

2. Dependent Care Deduction

- a. In each AFDC-Related Community case, there shall be allowed a deduction from gross income for the care of a dependent child or an incapacitated parent or spouse. The amount allowed as a deduction shall be the actual cost, but not to exceed \$160 per dependent child or incapacitated individual per month. If the member of the filing unit who is claiming the deduction is employed less than full-time, he may receive a proportionate share of the \$160 deduction. The following standards shall be used to determine the maximum proportionate share of the \$160, per dependent child or incapacitated individual, for which an individual is entitled. In all situations the amount allowed for dependent care shall be the actual expenditure or the maximum allowable deduction, whichever is less.

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WEEKLY HOURS	MONTHLY HOURS	MAXIMUM DEDUCTION
1 - 10	1 - 43	\$40
11 - 20	44 - 87	\$80
21 - 30	88 - 130	\$120
31 - above	131 - above	\$160

b. Restrictions

1. For the purpose of this section a deduction is not allowed for a child age 14 and over unless incapacitated.
2. This deduction shall not be allowed for a payment made to any member of the filing unit or to any individual residing in the same household.
3. A member of the filing unit who meets the provisions of (A) (1) (b) of this section shall not be eligible for the dependent care deduction.
4. The dependent care deduction shall not be applied to rental, roomer and boarder income.

c. Verification

1. The amount to be allowed as a dependent care deduction shall be verified. The only acceptable verifications are: (a) a signed and dated statement from a day care provider; or (b) a cancelled check or money order payable to the day care provider.
2. The incapacity of a dependent child 14 years of age or older or of any other individual for whom dependent care costs are being claimed must be verified. Incapacity is verified by a current statement from a competent medical authority, as defined in Section 501.500 (J).

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(3) Eligibility for the "\$30 and one-third Disregard"

A family or an individual who has received AFDC cash assistance in any one of the four calendar months that precedes the month of application for Medical Assistance is eligible to have \$30 and one-third of remaining gross earned income, after dependent care and work-related expense deductions, disregarded. This disregard continues to be applied only as long as it can be established that in at least one of the preceding four calendar months AFDC cash assistance was received.

The \$30 and one-third disregard of earned income does not apply in the month in which the individual:

- a. terminated his employment or reduced his income without good cause; or
- b. refused without good cause an offer of employment through the Division of Employment Security or any other bona fide offer of employment by an employer. Determination as to whether an offer was a bona fide offer of employment is to be made by the Department.

Cross-reference: 106 CMR 504.440(D)

(B) SSI-Related Filing Units

A standard earned income deduction is allowed to SSI-Related filing units. The standard earned income deduction is deducted from the gross earned income of each employed individual or married couple in the filing unit.

The following amounts shall be deducted in the order indicated:

- (1) \$20, if there is no unearned income in the filing unit or
- (2) \$65; and
- (3) one-half of the remainder.

506.130: General Income Deductions: Community Cases

General income deductions are made from countable income after all other unearned and earned deductions have been allowed. In AFDC-Related filing units, a deduction for court-ordered payments for the support of dependents and a deduction for health care coverage (when deducted from pay) shall be allowed.

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CALCULATION OF FINANCIAL ELIGIBILITY(A) Deductions for Health Care Coverage(1) Requirements

When health insurance premiums or membership costs in a Health Maintenance Organization are deducted from an individual's pay, the individual shall be entitled to a disregard of that amount. This disregard shall be in addition to the \$75 work-related expense deduction allowed in section 506.120(A)(1).

When payments are made directly to a Health Maintenance Organization or to an insurer, such payments shall be considered in meeting the spend-down liability.

A deduction for health care coverage is not allowed in Pickle Amendment cases.

For SSI-Related filing units, the allowance for health care coverage is included in the standard earned income deduction.

(2) Verifications

The verification of proof that a deduction from pay was made is mandatory and shall be a pay stub or letter from an employer specifying the amount deducted.

(B) Deductions for Court-Ordered Payments and CSEU Agreements(1) Requirements

In AFDC-Related filing units, payments, such as child support and alimony, made by an applicant or recipient pursuant to a court's order for the support of dependents, are deducted from income. Payments made pursuant to an agreement with a Child Support Enforcement Unit shall also be deductible.

(2) Verifications

The mandatory verification of such court ordered payments shall be one of the following:

- a. a copy of the court order and a record of payment; or
- b. a written statement from an employer documenting the execution of a wage assignment.

506.200: Income Deductions: Long-Term Care Cases

Earned and general income deductions are allowed for long-term care cases.

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CALCULATION OF FINANCIAL ELIGIBILITY(A) Deductions for Health Care Coverage(1) Requirements

When health insurance premiums or membership costs in a Health Maintenance Organization are deducted from an individual's pay, the individual shall be entitled to a disregard of that amount. This disregard shall be in addition to the \$75 work-related expense deduction allowed in section 506.120(A)(1).

When payments are made directly to a Health Maintenance Organization or to an insurer, such payments shall be considered in meeting the spend-down liability.

A deduction for health care coverage is not allowed in Pickle Amendment cases.

For SSI-Related filing units, the allowance for health care coverage is included in the standard earned income deduction.

(2) Verifications

The verification of proof that a deduction from pay was made is mandatory and shall be a pay stub or letter from an employer specifying the amount deducted.

(B) Deductions for Court-Ordered Payments(1) Requirements

In AFDC-Related filing units, payments, such as child support and alimony, made by an applicant or recipient pursuant to a court's order for the support of dependents, are deducted from income.

(2) Verifications

The mandatory verification of such court ordered payments shall be one of the following:

- a. a copy of the court order and a record of payment; or
- b. a written statement from an employer documenting the execution of a wage assignment.

506.200: Income Deductions: Long-Term Care Cases

Earned and general income deductions are allowed for long-term care cases.

506.210: Earned Income Deductions: Long-Term Care Cases

In AFDC-Related long-term care cases, each member of the filing unit who is employed full or part-time, is entitled to a maximum work-related expense deduction of \$75 in accordance with the provisions of section 506.120(A)(1).

SSI-Related long-term care cases are allowed the following deductions for each member of the filing unit in a long-term care facility:

- (A) \$11; and
- (B) Any of the following work-related expenses deducted from salary:
 - (1) Social Security taxes (FICA);
 - (2) federal and state income taxes;
 - (3) retirement and employee benefit plans;
 - (4) health or medical insurance premiums; and
 - (5) union dues.

506.220: General Income Deductions: Long-Term Care Cases

Deductions for health care coverage are allowed for long-term care cases.

Deductions for maintenance of a former home and deductions for maintenance of eligible dependents are allowed for long-term care cases.

These deductions shall be made after all deductions.

(A) Deductions for Health Care Coverage

(1) Requirements

When health insurance premiums or membership costs in a Health Maintenance Organization are deducted from an individual's pay, the individual shall be entitled to a disregard of that amount. This disregard shall be in addition to the \$75 work-related expense deduction allowed in section 506.120(A)(1) for AFDC-Related cases.

In both AFDC-Related and SSI-Related cases, when payments are made directly to a Health Maintenance Organization or to an insurer, such payments shall be considered in meeting the spend-down liability.

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If the eligible dependent(s) is neither AFDC-Related nor SSI-Related, only the following earned income deductions are allowed:

- a. \$11, and
- b. any of the following work-related expenses when they are deducted from salary:
 1. Social Security taxes (FICA);
 2. federal and state income taxes;
 3. retirement and employee benefit plans;
 4. health or medical insurance premiums; and
 5. union dues.

Income from the institutionalized applicant or recipient shall be deducted to bring the countable income, less deductions, of the eligible dependent up to the community MA Income Standard for a family of that size, or the size of a family remaining at home.

(2) Verifications

The verifications of the income and assets of eligible dependents and the verifications of basic and categorical eligibility requirements are mandatory and shall be in accordance with Chapters 503.000, 504.000 and 505.000.

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Chapter 506
(1 of 2) Page 506.220(B) Deductions for Maintenance of a Former Home(1) Requirements

A deduction for maintenance of a home is allowed when a competent medical authority certifies in writing that a single individual, with no eligible dependents in the home, is likely to return home within six months from the month of admission.

This income deduction terminates at the end of the sixth month following the month of admission regardless of the prognosis to return home at that time.

The income to be deducted shall be the MA Income Standard for one person in the community or the actual cost of maintaining the home, whichever is less.

(C) Deductions for Support of a Spouse and/or Dependent Children(1) Requirements

When an applicant or recipient in long-term care has a spouse and/or dependent child(ren) at home, a deduction for their support is allowed if:

- a. the net income of the family members remaining in the community, computed according to the standards of this chapter, is less than the MA Income Standard for a family of that size; and
- b. the countable assets of the institutionalized individual and his family at home are within the asset limitations for a family of that size.

MEDICAL ASSISTANCE
CALCULATION OF FINANCIAL ELIGIBILITY506.300: Calculations of Financial Responsibility and Inclusion in the Assistance Unit(A) Calculation of Financial Responsibility

The calculation of the amount of financial responsibility available from an individual, not included in the assistance unit, to the person for whom he is responsible is provided below.

This calculation does not apply to parents for children or spouse for a spouse who are residing in the same household.

- (1) The total countable income of the financially responsible individual is determined in accordance with the income policies of Chapter 505.
- (2) From the total countable income, subtract applicable income deductions as determined in accordance with the income deductions policies of this Chapter.
- (3) From the result of the above calculation, subtract the applicable MA Income Standard.

(B) Calculation for Inclusion in the Assistance Unit

The calculation for inclusion in the assistance unit of an individual who has the option of being included is described below.

- (1) The eligibility of all individuals in the assistance unit is determined including the individual with the option of being included.
- (2) If the unit is ineligible, the individual with the optional inclusion may be excluded and the eligibility of the assistance unit recalculated with an MA Income Standard that does not include the optional person.

506.400: MA Income Standards

The MA Income Standards are the standards of need established by the Department and used for the determination of financial eligibility.

Eligibility shall be established for an otherwise eligible individual whose Net MA Income is equal to or less than the applicable MA Income Standard. If Net MA Income is greater than the MA Income Standard, eligibility may be established on the basis of the spend-down provisions.

506.410: Community Cases

The following table provides the MA Income Standards applicable to AFDC-Related and SSI-Related filing units residing in the community.

TABLE OF MA INCOME STANDARDS COMMUNITY CASES	
Number of Persons	Income Standard
1	\$333
2	425
3	435
4	445
5	510
6	576
7	641
8	706
9	771
10	836
Each additional person	+ 66

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The MA Income Standard for an AFDC-Related or SSI-Related long-term care case is:

TABLE OF MA INCOME STANDARDS INSTITUTIONAL AND COMMUNITY ICF-MR CASES	
Number of Persons	Income Standard
1	\$40

506.500: Spend-Down Eligibility: Community Cases

Sections 506.500-506.580 apply to otherwise eligible community cases whose net MA income exceeds the MA Income Standard for community cases.

506.510: The Spend-Down Period

The spend-down period is a six (6) month prospective period which starts on the first day of the month of service of the earliest bill used to meet the spend-down amount. This date shall not be earlier than three (3) months prior to the month of application and shall not extend more than six months from the first day of application.

506.520: Calculating the Spend-Down Liability

The spend-down liability is the amount of excess income that the applicant or recipient is considered to have available to meet medical expenses during the spend-down period.

The amount by which the Net MA Income exceeds the MA Income Standards is the excess monthly income. The spend-down liability is determined by multiplying the excess monthly income by six.

506.530: Notification of Potential Eligibility

An applicant who has excess monthly income shall be informed that he is ineligible for MA but that eligibility may be established by meeting the spend-down liability.

(A) The applicant shall be notified in writing of the following:

- (1) the spend-down liability amount;
- (2) the method of calculation;
- (3) the procedures for submitting medical bills; and
- (4) his responsibility to report all changes in circumstances that may affect eligibility or spend-down amount.

(B) A recipient who has excess monthly income shall be informed that he is ineligible but that eligibility may be re-established by meeting the spend-down liability.

In addition, the recipient shall be notified in writing of the factors set forth in subsection (A)(1)-(4) above.

506.540: Submission of Medical Bills

(A) Criteria

To be eligible on the basis of spend-down, the applicant or recipient shall submit medical bills, paid or unpaid, that in total, equal or exceed the spend-down liability, and that meet the following criteria:

- (1) the service shall have been performed no earlier than the first day of the third month prior to the month of application;
- (2) the service shall have been provided to a member of the filing unit;

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- (3) the bill must not be subject to further payment by health insurance coverage or other liable third party coverage; and
- (4) the bill shall be for an allowable medical expense as provided in subsection (B).

(B) Allowable Expenses

In addition to all medical services covered by the Medical Assistance Program, the only other medical expenses which may be applied to the spend-down liability are as follows:

- (1) non-prescription drugs;
- (2) chiropractic services;
- (3) adult day care;
- (4) disposable diapers for an incontinent adult; and
- (5) air conditioners, humidifiers or other health-related equipment when prescribed by a treating physician.

(C) Non-Allowable Expenses

Medical expenses that may not be applied to the spend-down liability include, but are not limited to, the following:

- (1) cosmetic surgery;
- (2) rest-home care;
- (3) weight training equipment;
- (4) masseur(euse) services; and
- (5) special diets.

506.550: Verification of Medical Expenses

The verification of medical expenses is mandatory and, with the exception of non-prescription drugs, shall be a bill or a written statement from a health care provider that includes all of the following:

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- (A) the type of service provided;
- (B) the name of the person for whom the service was provided;
- (C) the amount charged for the service; and
- (D) the date of the service.

The verification of non-prescription drugs is mandatory and shall be a receipt from the provider of the drug.

506.560: Interim Changes

The worker shall review an applicant's or recipient's eligibility and spend-down liability upon notification of any interim change occurring prior to meeting the spend-down liability or during the spend-down period.

506.570: Conclusion of the Spend-Down Process

When bills submitted are equal to or greater than the spend-down liability and all other eligibility requirements continue to be met, the applicant shall be notified that he is eligible. The recipient is eligible for payment of all covered medical expenses incurred during that spend-down period, other than those submitted to meet the spend-down liability, as long as all other eligibility requirements continue to be met during the balance of the spend-down period.

506.580: Redetermination of Spend-Down Cases

When an applicant meets the spend-down liability, eligibility continues only to the end of the spend-down period. At the end of the spend-down period, the case shall be closed and redetermined.

A redetermination form shall be sent to the recipient prior to the end of the spend-down period. If the recipient is otherwise eligible, a new spend-down liability shall be determined.

506.600: Spend-Down Eligibility: Long-Term Care Cases

Sections 506.600-506.620 apply to otherwise eligible long-term care cases whose Net MA Income exceeds the MA Income Standards for long-term care cases.

MEDICAL ASSISTANCE
CALCULATION OF FINANCIAL ELIGIBILITY506.610: Calculating the Spend-Down Liability

The spend-down liability for long-term care cases is the amount by which the applicant's or recipient's Net MA Income exceeds the MA Income Standard for long-term care cases. The individual must meet the spend-down liability by incurring expenses for which he is liable.

506.620: Meeting the Spend-Down Liability

- (A) If the cost of care in the long-term care facility at the public rate exceeds the excess monthly income (spend-down liability), the spend-down liability is met monthly by payment to the facility and is called the Patient Paid Amount.
- (B) If the excess monthly income exceeds the cost of care in the long-term care facility at the public rate, the six-month spend-down provisions for community cases apply.

The spend-down liability shall be the amount by which the Net MA Income exceeds the appropriate MA Income Standard for long-term care cases, multiplied by six.

The applicant must incur allowable expenses equal to the spend-down liability in order to become eligible for Medical Assistance. The Department will then pay the cost of care for the remainder of the six month spend-down period.

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- 507.110: Eligibility for Benefits
- 507.120: Exploration of Alternate Resources

507.000: Overview of Related Benefits

This Chapter presents a description of related program benefits for which certain recipients may be eligible.

507.100: Funeral and Burial Expenses

The Department shall provide payment for a recipient's funeral and burial expenses of up to \$300 when the total expenses incurred did not exceed \$500.

507.110: Eligibility for Benefits(A) Requirements

Payments for funeral and burial expenses shall be authorized if:

- (1) total funeral and burial expenses do not exceed \$500; and
- (2) resources sufficient to cover the costs are not available.

(B) Verifications

The mandatory verification of the total and unpaid portion of funeral and burial expenses shall be an itemized bill on letterhead or billhead from the funeral director which shall include any payments received or expected to be received.

507.120: Exploration of Alternate Resources

The worker shall attempt to determine if alternate resources are available. Eligibility for Social Security (RSDI) death benefits, life insurance, and prepaid funeral and burial contracts shall be explored and noted in the case record.

If RSDI death benefits have been paid to the widow(er) of a deceased wage earner who was living in the same household as the deceased wage earner at the time of death, and the Department has paid for any funeral and burial expenses, the Department shall file a claim for these benefits.

FOOD STAMP HANDBOOK SUPPLEMENT VII

RESTORATION OF LOST BENEFITS

I. Introduction

- (A) A Forward Adjustment is the process of restoring food stamp benefits to any household which was entitled to more bonus coupons than it received. It is accomplished by increasing the coupon allotment the household currently receives.
- (B) A Forward Adjustment is not used to reconcile an overpayment of the purchase requirement by the Food Stamp participant. Such an overpayment requires a cash refund procedure, which is the subject of Supplement IV. In some cases cash refunds are coupled with Forward Adjustments. See Supplement IV for explanation and example(s).
- (C) The issuing of a forward adjustment does not require the action of a fair hearing. Whenever an underpayment is discovered and the household is entitled to restoration of lost benefits (see Item II below), the EW shall calculate the amount of the lost benefits and authorize payment to the household.

II. Entitlement

A Forward Adjustment is due a household in the following administrative situations.

(A) Agency Delay

"The State agency must either approve or deny applications for participation within thirty (30) days from the receipt of an identifiable application" (Food Stamp Certification Handbook, page 2, paragraph 2020). Since Massachusetts issues Authorizations to Participate (ATP's) in monthly allotments, benefits are due from the first of the month following the date of application. If an ATP is received during the calendar month following the date of application, the agency will have fulfilled the prompt action regulation of the Food Stamp Certification Handbook and a Forward Adjustment would not be necessary.

(B) Erroneous Denial of Benefits

(C) Erroneous Termination of Benefits

(D) Underissued Bonus Coupons as a Result of an Incorrect Coupon Allotment

This situation occurs only when there is an underpayment in the coupon allotment to the household. It generally occurs as a result of an error in the household size computation.

III. Restoration of Lost Benefits at Application

All new households, not certified promptly (Agency delay), will have the Forward Adjustment entered on the initial Turnaround Document (TD) used to

RESTORATION OF LOST BENEFITS

activate the case on the Recipient Master File and authorize issuance of ATP(s).

IV. Restoration of Lost Benefits to Ineligible Households

If a household is currently not eligible to participate in the Food Stamp Program, the amount of benefits still owed to the household will be recorded in the case record and made available if the household again becomes eligible.

The amount of the Forward Adjustment will be computed by use of the Food Stamp Forward Adjustment Notice, FSP-8. When computing entitlement for the months after January 1, 1979, the EW will use only the Monthly Bonus and Months Due Columns to compute the correct amount owed. The original of the FSP-8 shall be sent to the household, and a copy placed in the case record. No further notice is required.

V. Authorizing Payment

The amount owed the household is entered onto the Recipient Master File by means of a TD.

VI. Payment to the Household

In no case shall the monthly coupon allotment issued to the household under EPR exceed 150% of the Maximum Coupon Allotment for the household size. The amount issued to the household each month until the Restoration of Lost Benefits is completed will be calculated by the computer. This amount will be the difference between the household's monthly coupon allotment under EPR and up to 150% of the maximum coupon allotment for the household size.

- o. Educational Grants, Loans Scholarships, Stipends - Written or verbal statement from institutions or agency.
- p. Foster Care - Written or verbal statement from agency or copy of check.
- q. Strike Benefits - See Handbook.
- r. Dividends, Interest, and Royalties - See Handbook.
- s. Payments from roomers and boarders.

2. MANDATORY DEDUCTIONS

- a. Federal Income Tax - See Handbook.
- b. State Income Tax - See Handbook.
- c. FICA (Social Security Deduction) - See Handbook.
- d. Retirement - See Handbook.
- e. Union Dues - Pay stubs, written or verbal statement from union or employer, or applicant's union book.

SECTION B - MINIMUM ADDED STATE REQUIREMENTS (Prudence requires verifications in all cases as specified)

It is the policy of the Massachusetts Department of Public Welfare that the following will always be verified, in the manner and to the extent indicated:

- 1. Public Assistance or Medicaid - Verify in all cases whether any members of the household are on any type of public assistance or medicaid (for completion of computer forms). Method: Computer Payments Run-Off.

2. DEDUCTIONS

- a. Tuition or Mandatory Education Costs - Verify by paid bill, receipt, or letter from institution.
- b. Alimony/Support Paid - Court order or written statement from attorney who handled divorce or separation; and receipts, cancelled checks, money orders, probation or agency records, or written statement from spouse of former spouse. NOTE: The actual payments made in one consecutive 30 day period in the 60 days prior to application will determine the amount to be allowed monthly for the length of the certification period. Voluntary contributions and any payments in excess of the court order are not to be counted.

- c. Disaster or Casualty Loss - See Handbook. Verification that the disaster or casualty loss did occur is required by policy report, agency report, fire department report, or insurance company report. (Amount deducted for loss - Refer to Section C. No. 7 of this Supplement).
- d. Rent or Mortgage - Verification which establishes monthly amount due is sufficient; i.e., mortgage bill, statement, or receipt; rent bill, or receipt, cancelled check, money order, written statement from landlord with monthly amount due, or lease.
- e. Real Estate Taxes - One most recent tax bill, receipt, cancelled check, money order, or verbal statement from tax assessment office. Prorate expenses over number of months the bill is intended to cover.
- f. Medical Care - (Including doctor, dental, hospital, prescribed medicine, health insurance, Medex, Live-in-attendant, nursing and essential care) shall always be verified when the amount exceeds \$40 per month or \$480 per year per household or if the amount is extremely questionable. Medical expenses paid during the 30 days prior to date of application shall determine the amount to be allowed monthly for the length of the certification period unless the household can provide verification during the certification period that requires a change in the deduction allowed by use of a Desk Review (2402) procedures.

Verification Method - bills, receipts, cancelled checks, money orders, check book stubs, or written statement from doctor, dentist, druggist, etc. Verification is not required if amount claimed is \$40 or less per month unless EW finds information submitted to be extremely questionable.

- g. Utility costs (heating, cooking fuel and electric expenses) - See 2264.8.
3. Resources (Some of the Non-Exempt Resources) The resources below must always be verified if the household claims that they have those resources. (NOTE: Income cannot be counted as a resource in the month it is received.)
- a. Savings Bank or Credit Union Accounts - must be verified by a bank statement, bank book, or credit union statement.
 - b. Checking Accounts - must be verified by a bank statement, checking book records, or bank book.
 - c. U.S. Savings Bonds, Stocks or Bonds - must be verified by copies of stocks or bonds or previous year's income tax form. In addition, the current value of the resource must be determined.
4. Residence - must be verified if initial ATP is issued Over-the-Counter.
5. Identity - must be verified if initial ATP is issued Over-the-Counter by use of Social Security Card, drivers license, credit cards, or any document showing the applicant's name along with his picture or signature.

SECTION C - ADDITIONAL STATE REQUIREMENTS (Prudence requires verification only when
EW finds information submitted to be extremely questionable).

It is the policy of the Massachusetts Department of Public Welfare that the items in this section will be verified, if, in the judgement of the eligibility worker, the information submitted is extremely questionable. The standard of judgement to be used is that of the "prudent person" as set forth in the Handbook i.e., the reasonable judgement made by an eligibility worker, will use his judgement when a situation is extremely questionable; however, the Department intends this term to refer only to those individual situations where the information provided is blatantly contradictory to his experience or to his knowledge of the individual or community. Examples of extremely questionable information could include, but are not restricted to: situations where expenses are unrealistic in relation to income or family size, lack of memory on the applicant's part, lack of knowledge of expenses by the applicant, contradictory information by the applicant, or unsolicited third party information.

VERIFY IF INFORMATION PROVIDED BY APPLICANT IS EXTREMELY QUESTIONABLE

1. Citizenship - See Handbook.
2. Residence (Where person lives) - See Handbook. Except for Over-the-Counter issued ATP for a new or reopened household in which case residence must be verified.
3. Resources (Non-exempt)
 - a. Real Estate: Land, Buildings - If extremely questionable, use copy of tax assessment. (See Handbook)
 - b. Insurance Settlement - If extremely questionable, letter of settlement from insurance company.
 - c. Recreational Equipment (Boats, motorcycle, etc.) - If extremely questionable, See Handbook.
 - d. Licensed Vehicles - If extremely questionable, See Handbook.
4. Work Registration - If extremely questionable, have persons(s) complete Work Registration Form (FNS-284).
5. Child/Adult Care - If extremely questionable, cancelled checks, money orders, receipts, bills or a written or verbal statement from agency, institution, or person.

6. Shelter Expenses

- a. Water - If extremely questionable, one most recent bill, receipt, cancelled check, money order, written or verbal statement from water department.
- b. Homeowner's Insurance - If extremely questionable, one most recent bill, receipt, policy, cancelled check, or money order.
- c. Electric (lights and/or cooking) - If extremely questionable, one most recent bill, receipt, cancelled check, or money order.
- d. Gas (cooking and/or hot water) - If extremely questionable, one most recent bill, receipt, cancelled check, or money order.
- e. Sewerage/Disposal/Rubbish Fees - If extremely questionable, one most recent bill, receipt, cancelled check, money order, or written or verbal statement from town hall.
- f. Special Assessments - If extremely questionable, one most recent bill, receipt, cancelled check, money order, or written or verbal statement from town hall.

7. Unusual Expenses - Verification of the amounts to be deducted as a casualty loss is not required unless they appear extremely questionable. If extremely questionable, paid bill, receipt, cancelled check, or money order.

- a. Disaster or Casualty loss
- b. Funeral Costs

8. Income Exclusions -(When households at zero or very low income levels continue their existence at apparent no income levels, list the income to explain the situation and do not count as income). See Handbook.

- a. Income from household member under 18 years of age.
- b. Nonrecurring lump sum benefits.
- c. Medical costs paid by non-household member.
- d. WIC payments.
- e. Payments for participants in domestic volunteers.
- f. In kind payments.
- g. All loans (except deferred educational loans.
- h. Irregular income \$10 per month or less.
- i. Relocation assistance payments.

9. Medical expenses under \$40 per month or \$480 per year per household.

SECTION D - NO ADDITIONAL STATE REQUIREMENTS - (Prudence does not require verification.)

It is the policy of the Massachusetts Department of Public Welfare, that no further verification, beyond applicant's statement, is necessary on the following items:

1. Boarder Allowance.
2. Telephone (Basis Rate Chart).
3. Social Security Number.
4. Dates of Birth.
5. Cooking Facilities.
6. Cash (on hand).
7. Resources (exempt).
8. Contributions by non-household member to household expenses.
9. Live-In-Attendant Allowance - Majority of meals is 11 meals per week.
10. Child/Adult Care Allowance - Majority of meals is 11 meals per week.

PROCEDURES FOR NOTIFYING APPLICANTS AND RECIPIENTS OF VERIFICATION REQUIREMENTS

Verification requirements are listed in FSP-1 Cover Letter, FSP-12 Notice of Recertification Requirement, and the FSP-15 Pending Verification Letter. They must be used in the following manner:

1. Applicants must be given or mailed FSP-1 Cover Letter with the application form.
2. Recipients due for recertification must be given or mailed FSP-12.
3. Applicants or recipients must be given FSP-15 at time of certification interview if verifications are pending.

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WELFARE
OFFICE OF ASSISTANCE PAYMENTS
FOOD STAMP PROGRAM

FOOD STAMP PROGRAM CERTIFICATION HANDBOOK
SUPPLEMENT VII

FAST ISSUANCE OF ATP'S FOR FOOD STAMP HOUSEHOLDS

This Supplement distinguishes between normal handling and emergency handling of Food Stamp applications and reapplications depending on the circumstances of the households.

The Department will inform all applicants about the availability of these procedures.

I. NPA HOUSEHOLDS

- A. Normal Certification Households - The majority of Food Stamp eligible households fall into this category. The households are certified within a 30-day period and receive their first Authorization To Purchase (ATP) in the month following the date of application. These households have adequate income or resources to maintain them during the waiting period. Normal handling procedures are to be followed.
- B. Special Certification Households - No gross income or very low gross income households eligible for food stamps at no cost. These have little or no liquid resources to draw upon in the period spanning application to receipt of a computer issued ATP.

In order to expedite emergency certification for these households, the following over-the-counter procedures are to be used:

1. Each WSO and ATP Issuance Office must designate individuals and back-ups for handling the over-the-counter issuance procedures.
2. Special consideration in the application procedures will be given if appointments are used, or where undue delay would be encountered in a first serve situation.
3. Priority eligibility determination and speedy supervisory approval are required. Paragraph 2313 of the Food Stamp Certification Handbook may be utilized. However, its utilization should not prevent same day issuance of the ATP.

NOTE: Verification of residence and identity will be required if the household's ATP is not mailed. Other verification requirements are unchanged in determining subsequent ATP issuance. See the Food Stamp Certification Handbook and Supplement II.

4. The Eligibility Worker will complete Form FSP-14 Over-the-Counter ATP Request Form in triplicate, for the calendar month in which the household applies. The original and first copy is given to the office designee who either completes the ATP or transmits the information from the Form FSP-14 to the issuance office so that an over-the-counter ATP can be created the same day. The last copy is placed in the case folder.
5. The Eligibility Worker will complete the computer entry documents (SS9A and SS9F) and forward them to the fiscal clerk who will forward them to the RDCU to establish the household on the computer for ATP reconciliation purposes as well as to provide for the household to receive a computer generated ATP in the following month.

The SS9F must have a food stamp start date of the first of the month following the date of application to insure that a second ATP will not be issued by the computer during the month of application. The SS9F Remarks Section shall include the notation "Over-the-Counter ATP Issued".

6. The WSO will provide the emergency household with an identification card (FSP-3). The household shall be presented with the option of picking up the ATP from the issuance office, courier service to the local office from the issuance office when available and useful, or having the ATP being placed in that day's mail by the Issuance Office.
7. The Issuance Offices will establish a time cut-off, not before 3 P.M., for these procedures to allow completion of the ATP document.
8. If courier service is not used, the Issuance Office designee will insure that the ATP will be placed in the mail if the emergency household or its representative does not pick it up at the Issuance Office prior to the latest available mail pick-up time in the particular community.

II PA HOUSEHOLDS

- A. Normal Certification Households - The households are certified within a 30-day period and receive their first Authorization to Purchase (ATP) in the month following the date of application. These households have adequate income or resources to maintain them during the waiting period. Normal handling procedures are to be followed.
- B. Special Certification Households - The majority of Food Stamp PA eligible households fall into this category. The household has no gross income or very low gross income and is eligible for food stamps at no cost. The household also has little or no liquid resources to draw upon in the period spanning application to receipt of a computer issued ATP.

NOTE: Income does not include the PA grant since the first PA check is generally not issued until the calendar month following the month of application.

In order to expedite emergency certifications for these households, the following over-the-counter procedures are to be used:

SECTION D - NO ADDITIONAL STATE REQUIREMENTS - (Prudence does not require verification.)

It is the policy of the Massachusetts Department of Public Welfare, that no further verification, beyond applicant's statement, is necessary on these following items:

1. Boarder Allowance.
2. Telephone (Basis Rate Chart).
3. Social Security Number.
4. Dates of Birth.
5. Cooking Facilities.
6. Cash (on hand).
7. Resources (exempt).
8. Payments from roomers/boarders.
9. Contributions by non-household member to household expenses.
10. Live-In-Attendant Allowance - Majority of meals is 11 meals per week.
11. Child/Adult Care Allowance - Majority of meals is 11 meals per week.
12. Utilities or medical under the amounts listed in Section B, numbers 2f, 2g, 2h, and 2i.

PROCEDURES FOR NOTIFYING APPLICANTS AND RECIPIENTS OF VERIFICATION REQUIREMENTS

Verification requirements are listed in FSP-1 Cover Letter, FSP-12 Notice of Recertification Requirement, and the FSP-15 Pending Verification Letter. They must be used in the following manner:

1. Applicants must be given or mailed FSP-1 Cover Letter with the application form.
2. Recipients due for recertification must be given or mailed FSP-12.
3. Applicants or recipients must be given FSP-15 at time of certification interview if verifications are pending.

POLICY ON RECERTIFICATION OF NPA HOUSEHOLDSA. INTRODUCTION

The recertification or subsequent certification of households currently receiving Authorizations to Purchase (ATPs) requires guidelines and procedures in order that consistency be maintained on a state-wide basis.

Certain procedures that follow will be mandatory for every WSO, while other procedures will be left open for alternative systems compatible with the capacities within a WSO.

The Regional Manager must designate the appropriate authority for approving optional procedures of a WSO in recertification of Non-Public Assistance (NPA) households.

The policies and procedures of subsequent certifications of households that are receiving food stamps, and who wish to continue their entitlement, are stated in paragraph 2410 ("Upon expiration of the certification period, benefits will be terminated without additional notice or the right to a pre-termination hearing for any household that fails, without good cause, to comply with its notice of recertification requirement.") and paragraph 2411 ("The household can prevent any lapse in benefits due to the expiration of the certification period by complying with the notice of recertification requirement. This is accomplished by the household's making a timely application, completing the required interview with the EW, and cooperation with EW requests for the additional information or verifications necessary for processing the application in accordance with the time requirements listed in the household's notice of recertification requirement.")

B. EXPIRATION DATE

1. Mandatory - The expiration date of a certification period for a NPA household shall be the last day of the month in which eligibility terminates.
2. Optional - None.

C. RESPONSIBILITY

1. Mandatory - The responsibility for the continuation of eligibility after the initial or subsequent certification requires the cooperation of both the recipient and the EW. (See Paragraphs: 2411, 2412, and 2412.1)
2. Optional - None.

I. NOTICE OF RECERTIFICATION REQUIREMENT (FORM FSP-12 REV. 11/77)

Mandatory - In order to insure a household's timely application for continued participation in the Food Stamp Program, the Department shall forward a computer generated Form FSP-12 to households certified for three months or longer. This notice must be sent by the Department in the month prior to last month of certification. The recertification interview must be completed by the time specified by the Department or the EW in order to avoid interruption in the benefits, and to prevent technical problems such as, Forward Adjustments, Claim Determinations or termination or loss of benefits for households who would be eligible if they made a timely recertification.

NOTE: The FSP-12 serves as a second reminder to households certified for three months or longer because they are told of the recertification requirement in their notice of eligibility for initial or subsequent benefits.

J. PENDING VERIFICATION LETTER (FORM FSP-15)

1. Mandatory - The household shall be given the original of Form FSP-15 with the necessary verifications checked off as a reminder, if there are verifications outstanding at the time of a certification interview. A duplicate copy shall be filed in the case record to serve as a reminder to the EW that verifications are outstanding.

2. Optional - None.

K. NOTICE OF ADVERSE ACTION (FORM FSP-5 REV. 8/77)

1. Mandatory - If a household has made a timely recertification and is going to have its assistance reduced or terminated or if a household is having its assistance reduced or terminated within a certification period, the household shall be sent Form FSP-5 by the EW, at least ten days prior to the date on which the Department must take action to complete the reduction or termination. Two copies will be sent to the household. One copy will be filed in the case record. The original will be sent to RDCU for processing.

If the household requests a fair hearing and the request is received by the Division of Hearings before the date specified in the letter, the household will be entitled to continuation of benefits while the appeal is pending.

NOTE: If the household fails to make a timely recertification or fails to file a timely appeal, the household may be entitled to be treated as if it had made a timely recertification or appeal request only if it can establish to the EW that the failure was for good cause.

2. Optional - None.

SAMPLE NOTICE

FSP-12 (Rev. 11/77)

MASS. DEPT. OF PUBLIC WELFARE
NOTICE OF RECERTIFICATION REQUIREMENT

Your food stamp certification period expires at the end of the month written on the enclosed address card. This is the only notice you will receive. IF YOU DO NOTHING, YOUR FOOD STAMPS WILL STOP.

To recertify your eligibility with no interruption in your food stamps, contact your food stamp office as soon as possible, but no later than the first day of next month. To complete your recertification you must fill out an application, be interviewed, and provide the required verification to the eligibility worker.

If you cannot complete the above requirements of recertification and you have a good reason, you can ask the eligibility worker to extend your benefits for one (1) month while you finish your recertification.

Your food stamps will run out unless you take steps to have your eligibility for them recertified.

SPANISH TRANSLATION (Reverse side)

DEPARTAMENTO DEL BIENESTAR PUBLICO DE MASSACHUSETTS
NOTICIA REQUERIDA DE RECERTIFICACION

El periodo de su certificacion de Estampillas de Alimento expira al final del mes escrito en su tarjeta de direccion adjunta. Esta sera la unica notificacion que usted va a recibir. SI USTED NO HACE ALGO; SUS ESTAMPILLAS DE ALIMENTO SERAN SUSPENDIDAS.

Para recibir su elegibilidad sin interrupcion en sus Estampillas de Alimento, pongase en contacto con su oficina de Estampillas de Alimento lo mas pronto posible, pero no mas tarde del primer dia del mes entrante. Para completar su recertificacion usted debera llenar una solicitud, ser entrevistado y proveer la informacion y verificacion requerida al trabajador de elegibilidad.

Si usted no puede completar el requisito anterior de recertificacion y usted tiene una buena razon usted puede pedir al trabajador de elegibilidad que le extienda sus beneficios por un (1) mes mas mientras termina su recertificacion.

A menos que tome los pasos necesarios para recertificar su elegibilidad no va a seguir recibiendo sus Estampillas de Alimento.

REGIONAL OFFICE RESPONSIBILITIES (cont.)

5. The Regional Food Stamp Specialist shall list the participation data in block #9 of the FNS-293, adding the Forward Adjustment information if applicable. The Specialist shall sign in block #10 of the FNS-293.
6. If a cash refund was validated the signed original of the FNS-293 will be mailed to:

Finance and Program Accounting Division
Att: Gladys Peacock, Room 121 Audit W
Food and Nutrition Service, USDA
Washington, DC 20250

Instructions to Complete FNS-293: Refund for Overpayment of Food Coupon Issuance.

USDA has computerized the processing of FNS-293. All incorrectly completed FNS-293s will be returned by USDA.

Type of Refund

The Department has determined that cash refunds will always be issued through a "Request for Refund by FNS". Item C should always be checked.

#1 THRU 7 ONLY: TO BE COMPLETED BY CSA/WSO

Item No.

1. Project Area and State - Enter appropriate regional office and MA.
2. Case Number - Enter recipient social security number and category number.
3. Date (s) of Issuance (s) - List the dates on which overpayment occurred. Date must be in numeric format of MM/DD/YY (e.g. August 1, 1977 is shown as 08/01/77).
4. Name and Mailing Address of Head of Household - Enter name and address of person in whose name the Authorization To Purchase was issued. Massachusetts must be abbreviated as MA. The zip code must be given.
5. Reason (s) for Overpayment - Enter concise explanation of error that caused the overpayment. The Eligibility/Social Worker and supervisor shall affix signatures.
6. Actual Basis of Issuance - List the monthly amounts that were allotted for the month (s) involved. The amounts must be given in dollars and cents.

Remember: A separate FNS-293 must be completed for each different basis of issuance.

7. Corrected Basis of Issuance - List the monthly amounts that should have been allotted for the month (s) involved. The amount must be given in dollars and cents.

#8 THRU 10: TO BE COMPLETED BY REGIONAL OFFICE

8. ~~Computation~~ of Refund - List amounts as noted on the form and as necessary due to participation. The amount must be given in dollars and cents.
9. Remarks - Participation data shall be entered. The amount of the cash refund/forward adjustment shall be noted.
10. Signature and Title of Person Verifying and Authorizing Refund - The Regional Food Stamp Specialist shall sign, enter title, and date. Original signature must be on form, not a photo copy.
11. Refund Received By - NOT APPLICABLE.

FORM FNS-293
(6-73)

U.S. DEPARTMENT OF AGRICULTURE
FOOD AND NUTRITION SERVICE

FORM APPROVED
OMB NO. 40-R3865

REFUND FOR OVERPAYMENT OF FOOD COUPON ISSUANCE

FNS(FS) Instr. 736-2

Example #1

TYPE OF REFUND ("X" one and follow instructions for that entry)

- A. ☐ CASH REFUND FROM FOOD COUPON RECEIPTS. Complete items 1 thru 11. Prepare in an original and two copies. Attach the original copy to Form FNS-250, Food Coupon Book Report; file one copy in the recipient's case file; and retain one copy for audit purposes.
- B. ☐ REFUND FROM STATE OR LOCAL AGENCY. Complete items 1 thru 10. Prepare in an original and two copies. Send the original to the FINANCE AND PROGRAM ACCOUNTING DIVISION, FNS, U.S. DEPARTMENT OF AGRICULTURE, WASHINGTON, DC 20250; file one copy in the recipient's case file; and retain one copy for audit purposes.
- C. ☒ REQUEST FOR REFUND BY FNS. See Supplement IV, Mass. Food Stamp Certification Handbook.

1. PROJECT AREA AND STATE New Bedford, MA		2. CASE NO. 000-32-3456-9	3. DATE(S) OF ISSUANCE(S) 01/01/77 - 02/01/77
4. NAME AND MAILING ADDRESS OF HEAD OF HOUSEHOLD (Include ZIP code) Thomas Johnson 1 Main Street Anytown, MA. 00001		5. REASON(S) FOR OVERPAYMENT Error in Computation by Eligibility Worker _____ ELIGIBILITY WORKER (Signatures) SUPERVISOR	
6. ACTUAL BASIS OF ISSUANCE A. \$ 114.00 B. 68.00 C. 182.00		7. CORRECTED BASIS OF ISSUANCE A. \$ 84.00 B. 98.00 C. 182.00	
8. COMPUTATION OF REFUND A. \$ 114.00 AMOUNT FROM LINE 6A B. 84.00 AMOUNT FROM LINE 7A C. 30.00 AMOUNT OF OVERPAYMENT (Line A minus B) D. 2 NO. OF OVERPAID ISSUANCES E. 60.00 TOTAL OVERPAYMENT (Line C times D) F. 0.00 AMOUNT APPLIED AGAINST RECIPIENT CLAIM G. 60.00 AMOUNT OF REFUND (Line E minus F)		9. REMARKS January 77 - Full participation February 77 - Full participation	
10. SIGNATURE AND TITLE OF PERSON VERIFYING AND AUTHORIZING REFUND Food Stamp Specialist			DATE 3/28/77
11. REFUND RECEIVED BY (Recipient must sign ALL copies)			
SIGNATURE NOT APPLICABLE		AMOUNT RECEIVED NOT APPLICABLE	DATE NOT APPLICABLE
FOR USDA USE ONLY			
DATE RECEIVED BY FI DIVISION	DATE REFUND TO RECIPIENT APPROVED, OR DATE REIMBURSEMENT TO STATE OR LOCAL AGENCY APPROVED		
Trans. by S.L. 440			

FORM FNS-293
 (6-73)

U.S. DEPARTMENT OF AGRICULTURE
 FOOD AND NUTRITION SERVICE

FORM APPROVED
 OMB NO. 40-R3865

REFUND FOR OVERPAYMENT OF FOOD COUPON ISSUANCE
 FNS(FS) Instr. 736-2

Example #2

TYPE OF REFUND ("X" one and follow instructions for that entry)

- A. ☐ CASH REFUND FROM FOOD COUPON RECEIPTS. Complete items 1 thru 11. Prepare in an original and two copies. Attach the original copy to Form FNS-250, Food Coupon Book Report; file one copy in the recipient's case file; and retain one copy for audit purposes.
- B. ☐ REFUND FROM STATE OR LOCAL AGENCY. Complete items 1 thru 10. Prepare in an original and two copies. Send the original to the FINANCE AND PROGRAM ACCOUNTING DIVISION, FNS, U.S. DEPARTMENT OF AGRICULTURE, WASHINGTON, DC 20250; file one copy in the recipient's case file; and retain one copy for audit purposes.
- C. ☒ REQUEST FOR REFUND BY FNS. See Supplement IV, Mass. Food Stamp Certification Handbook.

1. PROJECT AREA AND STATE Greater Boston, MA		2. CASE NO. 000-32-3456-9	3. DATE(S) OF ISSUANCE(S) 01/01/77 - 02/01/77						
4. NAME AND MAILING ADDRESS OF HEAD OF HOUSEHOLD (Include ZIP code) Thomas Johnson 1 Main Street Anytown, MA 00001		5. REASON(S) FOR OVERPAYMENT Error in Computation by Eligibility Worker <table border="1"> <tr> <th>ELIGIBILITY WORKER (Signatures)</th> <th>SUPERVISOR</th> </tr> <tr> <td></td> <td></td> </tr> </table>		ELIGIBILITY WORKER (Signatures)	SUPERVISOR				
ELIGIBILITY WORKER (Signatures)	SUPERVISOR								
6. ACTUAL BASIS OF ISSUANCE A. \$ 114.00 B. 68.00 C. 182.00		7. CORRECTED BASIS OF ISSUANCE A. \$ 84.00 B. 98.00 C. 182.00	<table border="1"> <tr> <td>...PURCHASE REQUIREMENT...</td> <td></td> </tr> <tr> <td>.....BONUS.....</td> <td></td> </tr> <tr> <td>.....TOTAL ALLOTMENT....</td> <td></td> </tr> </table>	...PURCHASE REQUIREMENT...	BONUS.....	TOTAL ALLOTMENT....	
...PURCHASE REQUIREMENT...									
.....BONUS.....									
.....TOTAL ALLOTMENT....									
8. COMPUTATION OF REFUND A. \$ 114.00 AMOUNT FROM LINE 6A B. 84.00 AMOUNT FROM LINE 7A C. 30.00 AMOUNT OF OVERPAYMENT (Line A minus B) D. 0 NO. OF OVERPAID ISSUANCES E. TOTAL OVERPAYMENT (Line C times D) F. AMOUNT APPLIED AGAINST RECIPIENT CLAIM G. 0.00 AMOUNT OF REFUND (Line E minus F)		9. REMARKS January 77 - No participation February 77 - No participation Forward Adjustment of \$98x2 = \$196 due (7B x number of months)							
10. SIGNATURE AND TITLE OF PERSON VERIFYING AND AUTHORIZING REFUND Food Stamp Specialist			DATE 3/28/77						
11. REFUND RECEIVED BY (Recipient must sign ALL copies) SIGNATURE NOT APPLICABLE		AMOUNT RECEIVED DATE							
FOR USDA USE ONLY									
DATE RECEIVED BY FI DIVISION		DATE REFUND TO RECIPIENT APPROVED, OR DATE REIMBURSEMENT TO STATE OR LOCAL AGENCY APPROVED							
Trans. by S.L. 440									

U.S. DEPARTMENT OF AGRICULTURE
 FOOD AND NUTRITION SERVICE

FORM APPROVED
 OMB NO. 40-R3865

REFUND FOR OVERPAYMENT OF FOOD COUPON ISSUANCE

FNS(FS) Instr. 736-2

Example #3

TYPE OF REFUND ("X" one and follow instructions for that entry)

- A. ☐ CASH REFUND FROM FOOD COUPON RECEIPTS. Complete items 1 thru 11. Prepare in an original and two copies. Attach the original copy to Form FNS-250, Food Coupon Book Report; file one copy in the recipient's case file; and retain one copy for audit purposes.
- B. ☐ REFUND FROM STATE OR LOCAL AGENCY. Complete items 1 thru 10. Prepare in an original and two copies. Send the original to the FINANCE AND PROGRAM ACCOUNTING DIVISION, FNS, U.S. DEPARTMENT OF AGRICULTURE, WASHINGTON, DC 20250; file one copy in the recipient's case file; and retain one copy for audit purposes.
- ☒ REQUEST FOR REFUND BY FNS. See Supplement IV, Mass. Food Stamp Certification Handbook.

1. PROJECT AREA AND STATE Springfield, MA		2. CASE NO. 000-32-3456-9	3. DATE(S) OF ISSUANCE(S) 01/01/77 - 02/01/77
4. NAME AND MAILING ADDRESS OF HEAD OF HOUSEHOLD (Include ZIP code) Thomas Johnson 1 Main Street Anytown, MA 00001		5. REASON(S) FOR OVERPAYMENT Error in Computation by Eligibility Worker	
6. ACTUAL BASIS OF ISSUANCE A. \$ 114.00 B. 68.00 C. 182.00		7. CORRECTED BASIS OF ISSUANCE A. \$ 84.00 B. 98.00 C. 182.00	
8. COMPUTATION OF REFUND A. \$ 114.00 AMOUNT FROM LINE 6A B. 84.00 AMOUNT FROM LINE 7A C. 30.00 AMOUNT OF OVERPAYMENT (Line A minus B) D. 1½ NO. OF OVERPAID ISSUANCES E. 45.00 TOTAL OVERPAYMENT (Line C times D) F. 0.00 AMOUNT APPLIED AGAINST RECIPIENT CLAIM G. 45.00 AMOUNT OF REFUND (Line E minus F)		9. REMARKS January 77 - Full participation February 77 - One half participation 1½ (mo) x \$30(8C) = \$45 Cash Refund ½ (mo) x \$98(7B) = \$49 Forward Adjustment	
10. SIGNATURE AND TITLE OF PERSON VERIFYING AND AUTHORIZING REFUND Food Stamp Specialist			DATE 3/28/77
11. REFUND RECEIVED BY (Recipient must sign ALL copies)			
SIGNATURE NOT APPLICABLE		AMOUNT RECEIVED DATE	
FOR USDA USE ONLY			
DATE RECEIVED BY FI DIVISION		DATE REFUND TO RECIPIENT APPROVED, OR DATE REIMBURSEMENT TO STATE OR LOCAL AGENCY APPROVED	
Trans. by S.L. 440			

D. INTERVIEW REQUIREMENT

1. Mandatory - The Department shall be responsible for all recertification interviews and shall ensure the following:
 - a. A WSO with backlogged applications and which does not have "walk in" interview capacity shall offer a group recertification application process.
 - b. The applicant shall have the option of agreeing to a scheduled date for an interview.

NOTE: The Department shall in no case refuse a private interview, if requested by the applicant.

2. Optional - It shall be within the discretion of non-backlogged WSOs to recertify by the following: Individual appointment system, walk-in or group recertifications; designated days for recertification appointments, walk-ins or groups; utilization of trained volunteers for pre-screening purposes; use of community facilities such as volunteer centers, churches or halls; and other systems that meet the approval of the individual designated by the Regional Manager.

E. SCHEDULING GROUP RECERTIFICATIONS

1. Mandatory - The WSO shall give consideration to the number of participants scheduled for a group session in ratio to the available staff and physical facilities in order to avoid long waiting periods or any other undue hardship to the participants.
2. Optional - The number of participants scheduled for a group session shall be left to the discretion of the WSO and meet the approval of the individual designated by the Regional Manager.

F. RECERTIFICATION CONTROL SYSTEM

1. Mandatory - Each WSO must set up a system to identify the month in which eligibility ends in order to schedule timely recertifications.
2. Optional - The following are samples of an alphabetical index card and a chronological index card:

- a. An alphabetical index card for each participant currently certified serves as a feasible means for control of households at the WSO. The alphabetical index card system serves as an information center for inquiries and problems occurring and pertaining to adjusted income, purchase requirement, coupon allotment, category, household size, and other pertinent household information.

NAME: Last, First	SOC. SEC. #
STREET:	CATEGORY #
CITY:	HH SIZE
TEL. #	
CERTIFICATION PERIOD	ADJ. INC.
PURCHASE REQUIREMENT - COUPON ALLOTMENT	

- b. A chronological index card for recertification identifies the month the participating household is due for a subsequent interview and application. The card will be pulled for the month in which the certification period is ending for the household. The name, address and other information found on the card is transferred to the Notice of Recertification (FSP-12) and sent to the household informing them that they must be recertified in order to remain eligible for food stamp benefits.

NAME: Last, First	SOC. SEC. #
STREET:	CATEGORY #
CITY:	HH SIZE
TEL. #	
DATE DUE FOR RECERTIFICATION	

- c. If preferred, a single format can be used, with one copy filed alphabetically and the other by month in which notice of recertification requirement must be sent.

G. VERIFICATION

1. Mandatory - Verification of income is not required if the household makes application during the current certification period or within 30 days of its expiration, unless the source of income is changed or the amount of income is changed more than \$25 per month, or the previous certification was made without proper verification.

Verification of deductions, similarly, is not required if the household makes application during the current certification period or within 30 days of its expiration, and there is no change in source or amount more than \$25, and the verifications in the previous certification were made. Even when these conditions are not met, a deduction should be verified when required by the additional guidance in Supplement II of the Certification Handbook, which excludes certain forms of verification under all circumstances.

2. Optional - None.

H. NOTICE OF APPROVAL (FORM FSP-2 REV. 8/77)

1. Mandatory - At the time of approval of the initial certification; reapplication approval for a household not currently on the program; approval for the same or increased benefit during the certification period; and approval for the same or increased benefits upon timely recertification, the EW must send the household the original of Form FSP-2. A duplicate copy of Form FSP-2 sent to the household shall be filed in the case record. The Form FSP-2 must include:
 - a. The household's basis of issuance;
 - b. The period of eligibility;
 - c. The household's right to a fair hearing;
 - d. The household's obligation to report changes; and
 - e. The necessity for NPA households to file an application for subsequent certification by a specified time in order to continue receiving benefits or to receive an advance notice of adverse action.

NOTE: If the period of eligibility is for three months or more the household will be sent an additional reminder of the recertification requirement.

L. NOTICE OF DENIAL (FSP-2A REV. 8/77)

1. Mandatory - When a household is determined to be ineligible at the time of an initial application or when a household has failed to make a timely recertification without good cause and subsequently reapplies and is found to be ineligible, the household shall be sent an original of Form FSP-2A with a copy to the case record. The FSP-2A must contain the effective date of denial, the reason for the denial and the manual citation for the denial.
2. Optional - None.

M. OUTREACH FOR NPA CASES BEING DENIED/CLOSED (FSP-2A)

1. Mandatory - A copy of Form FSP-2B must be sent whenever Form FSP-2A or Form FSP-5 are sent to the household.
2. Optional - None.

N. RECERTIFICATION REPORTING SYSTEM

1. Mandatory - Until such time as a computer capability exists, it shall be the responsibility of the individual designated by the Regional Manager to maintain a record of the current situation of recertification in each WSO in the Region.
2. Optional - A reporting system from the WSO to the Regional Office may be maintained at the discretion of the Regional Manager.

O. REVIEW OF NOTIFICATION LETTER USE

FORM NUMBER	FORM NAME	FORM USE
FSP-1	FOOD STAMP PROGRAM APPLICATION	Given or mailed to NPA households at time of request for initial assistance or subsequent application.
FSP-1	COVER LETTER	Must be given with the FSP-1 application.
FSP-2	NOTICE OF APPROVAL	Must be sent at time of initial approval of application; approval of a subsequent reapplication after a lapse in eligibility; at time of increase or no change in benefits as a result of a timely recertification or reported change.
FSP-2A	NOTICE OF DENIAL	Must be sent at time of denial of initial application or untimely reapplication.

FSP-2B	OUTREACH FOR NPA CASES BEING CLOSED	Must be sent at time Form FSP-2A or FSP-5 is sent.
FSP-5	NOTICE OF ADVERSE ACTION	Two Forms FSP-5 must be sent at least 10 days in advance of Depart- ment action to terminate or reduce assistance <u>during a certification</u> <u>period or as a result of a timely</u> <u>recertification</u> . This offers the household the opportunity to request a pretermination or reduction hear- ing.
FSP-12	NOTICE OF RECERTIFICATION REQUIREMENT	Must be sent to NPA households who are certified for three months or more, in the month prior to the last month of certification.
FSP-15	PENDING VERIFICATION LETTER	If there are verifications outstand- ing at time of certification inter- view, the FSP-15 must be given to household.

NOTE: NPA cases who fail to comply with recertification requirements (which are explained in FSP-2 and FSP-12) without good cause will be terminated without the right of a pretermination hearing and without further notice.

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE
FOOD STAMP PROGRAM

DATE:

DEAR APPLICANT/RECIPIENT:

☐ Your application for Food Stamps has been approved.☐ Your timely application for recertification has been approved for continuance at (the same level of benefits) (an increase in benefits).☐ We have acted on a reported change in income, expenses and/or circumstances and have approved continuance at (the same level of benefits) (an increase in benefits).

YOU ARE ENTITLED (based on your statements and verifications) to an Authorization to Purchase (ATP) Food Stamps of \$_____ in value for payment of \$_____ for each monthly ATP during the certification period of eligibility from _____ to _____.

YOUR REPORTING RESPONSIBILITY - If a change in your household circumstances occurs, it is your responsibility to report the change to the above office within 10 calendar days of the date the change becomes known to you.

YOUR RECERTIFICATION RESPONSIBILITIES:

☐ Since your certification period is less than three months, if you wish to continue to receive food stamps without interruption after that date: (1) contact your Welfare Office and make arrangements to complete your recertification requirements; (2) file your application; (3) complete the interview with your Eligibility Worker; and (4) cooperate with requests for additional information or verifications. These things must be completed before _____. If you fail, without good cause, to complete your recertification responsibilities, your food stamp eligibility and benefits will expire at the end of your certification period with no further notice to you. If expiration of benefits occurs, you can always reapply, but it is to your advantage to be recertified by the date given to you in order to prevent interruptions in benefits.

☐ Since your household has been certified for three months or longer, you will be sent a separate notice of recertification requirements.

FOR NEW APPLICANTS - Your ATP for the first month of certification (if you have not already received one) will be received at any time during that month. You will receive your ATP on the first of each additional month in your certification period. SEE the back of this letter for information about the ATP and Your Identification Card.

YOUR APPEAL RIGHTS - If you feel that the above decision is incorrect for any reason, you have the right to a Fair Hearing. You must request this hearing within thirty days of the date of this letter. Forms for this purpose (Appeal Blank SS-10) are available at any office of the Department of Public Welfare.

(PHONE NUMBER) _____

NONDISCRIMINATION: You are entitled to Food Stamps, if eligible, without regard to race, color, religious creed, national origin, or political beliefs.

HERE'S WHAT A TWO-PART "ATP" LOOKS LIKE

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WELFARE
AUTHORIZATION TO PURCHASE FOOD COUPONS

IDENTIFICATION NUMBER			
REGION	OFFICE	CATEGORY	CARD HOLDER NUMBER
5	151	9	444444444-4

VALID FROM 12 / 01 / 75 TO 12 / 31 / 75

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WELFARE
AUTHORIZATION TO PURCHASE FOOD COUPONS

IDENTIFICATION NUMBER			
REGION	OFFICE	CATEGORY	CARD HOLDER NUMBER
5	151	9	444444444-4

VALID FROM 12 / 01 / 75 TO 12 / 31 / 75

777777777777

777777777777

NAME

ADDRESS

CITY OR TOWN ZIP CODE

Household
Size

05

A

NAME

ADDRESS

CITY OR TOWN ZIP CODE

Household
Size

05

B

CHECK PURCHASE OPTION BELOW AND SIGN

OPTION 1 ☐OPTION 2 ☐

YOU PAY \$45.00

YOU PAY \$22.50

TOTAL STAMPS \$91.00

TOTAL STAMPS \$46.00

SIGNATURE

SIGNATURE

VALID ONLY WITH I.D. CARD

CHECK PURCHASE OPTION BELOW AND SIGN

OPTION 1 ☐OPTION 2 ☐

YOU PAY \$45.00

YOU PAY \$22.50

TOTAL STAMPS \$91.00

TOTAL STAMPS \$46.00

SIGNATURE

SIGNATURE

VALID ONLY WITH I.D. CARD

- Each part of your ATP can be cashed in at two separate times *or* you can cash in both parts at the same time.
- Each part of the ATP offers a choice of "OPTION 1" or "OPTION 2".
- **OPTION 1** — means you want to buy all the stamps authorized on that part (one half of your monthly allotment).
- **OPTION 2** — means you want to buy half of the stamps authorized of that part (one quarter of your monthly allotment) and will forfeit the remaining quarter of your monthly allotment.
- ATP'S MUST BE USED WITHIN THE MONTH IN WHICH THEY ARE ISSUED.
- FOOD STAMPS ARE GOOD INDEFINITELY.
- FOOD STAMPS are COUPONS used exactly like money to buy food at all grocery stores certified by the U. S. DEPARTMENT OF AGRICULTURE. MOST GROCERS ARE CERTIFIED.
- **NONUSE OF ATP CARDS** — the state agency may STOP issuing ATP cards if you fail to purchase coupons for three (3) consecutive months. HOWEVER, YOU MAY REQUEST TO BE ISSUED ATP CARDS ANYTIME DURING THE REMAINDER OF YOUR CERTIFICATION PERIOD BY CONTACTING YOUR LOCAL WELFARE SERVICE OFFICE.
- YOU HAVE THE RIGHT TO APPEAL ANY DECISION MADE ABOUT THE AMOUNT YOU PAY FOR STAMPS, OR ANY DECISION WHICH AFFECTS YOUR PARTICIPATION IN THE FOOD STAMP PROGRAM, BY REQUESTING A FAIR HEARING. APPEAL FORMS ARE AVAILABLE AT YOUR LOCAL WELFARE SERVICE OFFICE.
- Enclosed with this notice (if you have not already received one) is an Identification Card (FSP-3). Please sign it at once. You should present this card when you buy stamps and when you purchase food with stamps. You may go to any Food Stamp distribution point in Massachusetts to purchase your stamps. Some in your area are: _____

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE
FOOD STAMP PROGRAM

NOTICE OF DENIAL

DATE:

NAME _____

ADDRESS _____

DEAR APPLICANT:

☐ Your most recent Food Stamp Application is denied effective _____ (DATE)
for the following reason(s): _____
(INCLUDE MANUAL CITATION)

If you disagree with this decision, you have the right to a fair hearing before a referee of the Department of Public Welfare. You may exercise this right by filing a request for a fair hearing within 30 days of this notice. If you wish to request a fair hearing complete the reverse side of one copy of this letter. Retain the second copy for your own information.

CHANGE IN HOUSEHOLD: YOU HAVE THE RIGHT TO MAKE AN ACTUAL CHANGE IN YOUR HOUSEHOLD COMPOSITION AND FILE A NEW APPLICATION. You may benefit from further discussion with an eligibility worker. (FSP-2B enclosed)

Nondiscrimination: You are entitled to Food Stamps, if eligible, without regard to race, color, religious creed, national origin or political beliefs.

ELIGIBILITY WORKER

TELEPHONE NUMBER

DEPARTMENT USE ONLY

REGION OFFICE CATEGORY SOCIAL SECURITY NO. CASE ASSIGNMENT NO.

Department of Public Welfare
Division of Hearings
600 Washington Street
Boston, Massachusetts 02111

REQUEST FOR A FAIR HEARING

Federal Regulations provide that if you are not satisfied with any action by the Department of Public Welfare, you have the right to appeal and receive a fair hearing before a referee of the Division of Hearings. The request for a fair hearing must be received by the Department within thirty (30) days of the official written notice to you of action by the Department which includes a statement on the right of appeal and time limit for appealing. PLEASE SEND COMPLETED FORM TO ABOVE ADDRESS.

Within five days after the Division of Hearings receives your request, you will be notified of the time, date and place of your hearing. If you are unable to attend the fair hearing, please contact the Division of Hearings at 727-6050 as soon as possible so that your fair hearing can be rescheduled. Failure to appear at the fair hearing without good cause may result in termination of the appeal.

At the fair hearing, you or another household member, may appear personally and may be accompanied by an attorney or other representative at your own expense. You may wish to contact a local legal service office or community agency which will provide advice or fair hearing representation at no charge. Information about these services, if available in your area, can be obtained by contacting the Welfare Service Office. You or your representative may subpoena witnesses, present evidence and cross examine witnesses. The referee must make a decision on all of the evidence presented at the hearing and only the evidence so presented. You or your representative will be permitted to see your written record prior to the hearing if you so desire.

I _____ hereby request a fair hearing
before a referee of the Division of Hearings. The reason I wish to request a fair
hearing is _____

NAME _____ TELEPHONE _____

ADDRESS _____ CITY/TOWN _____

SIGNATURE _____ DATE _____

My authorized representative is:

NAME _____ TITLE _____

ADDRESS _____ TELEPHONE _____

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE
FOOD STAMP PROGRAM

--

DATE:

DEAR RECIPIENT:

The Department is planning to take the necessary action to:

☐ Terminate your Food Stamps Assistance effective _____ for the following reason(s): _____
(INCLUDE MANUAL CITATION)

☐ Reduce your Food Stamps Assistance effective _____. The Purchase Requirement will go from _____ to _____ and the Coupon Allotment will go from _____ to _____. Your new certification period will be from _____ to _____.
Reason for change: _____
(INCLUDE MANUAL CITATION)

If you disagree with this decision, you have a right to a fair hearing before a referee of the Department of Public Welfare. You may exercise this right by filing a request for a fair hearing within 30 days of this notice. If you wish to request a fair hearing, complete the reverse side of one copy of this letter. Save the second copy for your own information.

If you request the hearing and it is received by the Division of Hearings before the date on which the Department must start action to make the adverse action, which is _____, your assistance will be continued through the end of the month in which a fair hearing decision is rendered unless the referee makes a determination at the hearing that the sole issue is one of State or Federal Law or policy. If you fail to request the hearing by the specified time above for good cause, which you can establish to the Eligibility Worker, you will be entitled to file an appeal as if it were a timely appeal.

ELIGIBILITY WORKER _____

SUPERVISOR _____

I SECTION COMPLETE BLOCKS 1, 7 DEPT USE ONLY										III SECTION			
1 ENTRY DATE MM DO YY	2 REG	3 SERVICE OFFICE	4 CAT	5 SOCIAL SECURITY NO.	6 NAME CHK	7 WORKER NO.	13 TYPE OF ENTRY (CIRCLE ONE)	14 ST.	18 START/CLOSE REVIEW DATE	19 ACTION REASON	20 GRNT ELUG		
/ /							E N						
21 ELIG. DEPS.						22 SVS CASE		23 GROUP CODE		24 NO. PAYMTS			
25 AMOUNT OF MONTHLY PAYMENT						26 AMOUNT		27 CD		28 AMOUNT			
29 ACTION REASON						40 HOUSEHOLD SIZE		41 ADJUST. NET INCOME		42 COUPON ALLOTMENT			
43 PURCH REQMT						44 ATP TYP		45 DATE OF CERT. EXPR.		46 NPA /PA			
47 TYPE OF ENTRY						48 DEP NO.		49 ST		50 START/CLOSE			
F													
V SECTION						VI SECTION COMPLETE FOR CHANGES IN AMOUNT OF PAYMENTS							
52 TYPE OF ENTRY	53 DEP NO.	54 ST	55 START/CLOSE	56 REAS	71 TYPE OF ENTRY	72 AMOUNT	73 DATE OF PAYMENT	74 PREVIOUS MONTHLY PAYMENT					
F					H		/ /						

THE COMMONWEALTH OF MASSACHUSETTS

Department of Public Welfare
Division of Hearings
600 Washington Street
Boston, Massachusetts 02111

REQUEST FOR A FAIR HEARING

The General Laws provide that if you are not satisfied with any action by the Department of Public Welfare, you have the right to appeal and receive a fair hearing before a referee of the Division of Hearings. The request for a fair hearing must be received by the Department within thirty (30) days of the official written notice to you of action by the Department which includes a statement on the right of appeal and time limit for appealing. You have 60 days to appeal a Medicaid issue. PLEASE SEND COMPLETED FORM TO ABOVE ADDRESS.

Within five days after the Division of Hearings receives your request, you will be notified of the time, date and place of your hearing. If you are unable to attend the fair hearing, please contact the Division of Hearings at 727-6050 as soon as possible so that your fair hearing can be rescheduled. Failure to appear at the fair hearing without good cause may result in termination of the appeal.

At the fair hearing, you may appear personally and may be accompanied by an attorney or other representative at your own expense. You may wish to contact a local legal service office or community agency which will provide advice or fair hearing representation at no charge. Information about these services, if available in your area, can be obtained by contacting the Welfare Service Office. You or your representative may subpoena witnesses, present evidence and cross examine witnesses. The referee must make a decision on all of the evidence presented at the hearing and only the evidence so presented. You or your representative will be permitted to see your written record prior to the hearing if you so desire.

I _____ hereby request a fair hearing before a referee of the Division of Hearings. The reason I wish to request a fair hearing is _____

NAME _____ TELEPHONE _____

ADDRESS _____ CITY/TOWN _____

SIGNATURE _____ DATE _____

My authorized representative is:

NAME _____ TITLE _____

ADDRESS _____ TELEPHONE _____

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE
FOOD STAMP PROGRAM

DATE:

DEAR FOOD STAMP RECIPIENT:

If you wish to continue to receive food stamps without interruption after the end of your certification period of eligibility which ends on _____. you must make a timely application for recertification.

A timely application for recertification is required at the following location:

Please bring information about your income, resources and expenses to the above location (on) (on or before) _____.

(Date or Date and Time)

If you are unable to appear and do not contact this office on or before the above date, your food stamp eligibility and benefits will expire with no further notice to you. (The appointment can be rescheduled if necessary.)

If you file an application and are interviewed by the time specified, you will be entitled to either continue to receive benefits or to receive a notice of adverse action prior to benefits being reduced or terminated. If you are dissatisfied with the decision you should file an appeal within 10 days of receiving the notice of adverse action in order to continue benefits until an appeal is heard.

Verification of your income or deductions shall be required at the recertification interview if the income or deductions have changed source, or have changed amount by \$25 or more, or have not been verified on your previous application. "Income" includes all monies that are received by the household from any source. "Deductions" include, as a minimum, the following: Rent or Mortgage Payments, Real Estate Taxes, Heating Costs, Medical Expenses, Alimony/Support being paid, Education Costs, Disaster or Casualty Loss.

If you fail to comply with this notice and can establish to the Eligibility Worker that your failure was for good cause, you must contact this office for an extension of benefits to allow you to complete the recertification requirement.

(Phone Number)

NONDISCRIMINATION: You are entitled to Food Stamps, if eligible, without regard to race, color, religious creed, national origin, or political beliefs.

(9) NOTICE OF RECERTIFICATION REQUIREMENT (FSP-12)

- MANDATORY** - In order to insure a household's timely application for continued participation in the Food Stamp Program, the Department shall forward the original of Form FSP-12 to households certified for three months or longer. This notice must be sent by the Department not less than seven (7) days and not more than twenty-one (21) days prior to household recertification interview. A duplicate copy of Form FSP-12 sent to the household shall be filed in the case record. The recertification interview must be completed fifteen (15) days prior to the last day of the current certification period in order to avoid interruption in the benefits, and to prevent technical problems such as Forward Adjustments, Claim Determinations or the continued participation of ineligible households in the Food Stamp Program.
- OPTIONAL** - Additional information may be attached to the Form FSP-12. Form FSP-12 may be sent to households certified two (2) months or less.

(10) PENDING VERIFICATION LETTER (FSP-15)

- MANDATORY** - In order to remind a household of verifications outstanding at time of a certification interview, the household shall be given the original of Form FSP-15 with the necessary verifications checked off. A duplicate copy shall be filed in the case record to serve as a reminder to the eligibility worker that verifications are outstanding.
- OPTIONAL** - None.

(11) NOTICE OF DENIAL/CLOSING (FSP-2A)

- MANDATORY** - If a household fails to respond to a recertification notice, or is ineligible at the time of an initial or subsequent certification, the ineligible household shall be sent an original of Form FSP-2A at the time closing action is taken, with copy to the case record, giving:
- a. The effective date of denial or closing.
 - b. The reason for denial or closing. Proper citation for failing to show or contact WSO is "Expiration of Certification period."

FSP-2A is not an advance notice prior to action. Advance notice requirement is met by FSP-12, Notice of Recertification Requirements (above).

Note: Form FSP-5 (Advance Notice of Change) and FSP-6 (Notice of Change) are not used at recertification. These forms are used only for changes that occur within the certification period (desk reviews).

- OPTIONAL** - None.

(12) RECERTIFICATION REPORTING SYSTEM

- MANDATORY - Until such time as a computer capability exists, it shall be the responsibility of the individual designated by the Regional Administrator to maintain a record of the current situation of recertifications in each WSO in the region.
- OPTIONAL - A reporting system from the WSO to the Regional Office shall be maintained.

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE
FOOD STAMP PROGRAM
PENDING VERIFICATION LETTER

NAME _____ DATE _____

ADDRESS _____ WSO _____

Dear Food Stamp Applicant/Recipient;

It is to your advantage to provide this office with verifications as soon as possible so we may make a timely determination or redetermination of your eligibility for Food Stamps. QUICK ACTION by you means that you will receive a correct Authorization to Purchase Food Stamps, if you are eligible, within a shorter time period.

This office must approve or deny your application within 30 days of receipt, or prior to the expiration of the certification period for current recipients. Your expense deduction or entire Food Stamp benefit may be denied if necessary verifications are lacking.

INCOME VERIFICATION REQUIRED: (Checked item has not been properly verified.)

- | | | |
|--|--|--|
| <input type="checkbox"/> WAGES | <input type="checkbox"/> WORKMAN'S COMP. | <input type="checkbox"/> FOSTER CARE PAYMENTS |
| <input type="checkbox"/> SELF-EMPLOYMENT | <input type="checkbox"/> SUPPORT/ALIMONY | <input type="checkbox"/> ROOMER/BOARDER PAYMENTS |
| <input type="checkbox"/> UNEMPLOYMENT COMP. | <input type="checkbox"/> STRIKE BENEFITS | <input type="checkbox"/> EDUCATIONAL LOANS, GRANTS |
| <input type="checkbox"/> SOCIAL SECURITY | <input type="checkbox"/> PENSIONS | <input type="checkbox"/> SCHOLARSHIPS, STIPENDS |
| <input type="checkbox"/> VETERAN'S PAYMENTS | <input type="checkbox"/> RENTAL INCOME | |
| <input type="checkbox"/> OTHER (SPECIFY) _____ | | |

DEDUCTION VERIFICATION REQUIRED: (Checked item has not been properly verified.)

- | | | |
|---|---|--|
| <input type="checkbox"/> FEDERAL AND STATE WITH-
HOLDING, F.I.C.A. (SOC.
SEC.) OR RETIREMENT
(MANDATORY) | <input type="checkbox"/> COURT ORDERED
ALIMONY/SUPPORT
PAYMENTS | <input type="checkbox"/> CHILD/ADULT CARE (FOR
WORK, EDUCATION, OR
TRAINING) |
| <input type="checkbox"/> UNION DUES | <input type="checkbox"/> MANDATORY EDUCATION
EXPENSES | <input type="checkbox"/> MEDICAL COSTS |
| <input type="checkbox"/> RENT/MORTGAGE | <input type="checkbox"/> REAL ESTATE TAXES | <input type="checkbox"/> HEATING COSTS |
| <input type="checkbox"/> OTHER (SPECIFY) _____ | | |

Acceptable verifications for the checked items are listed on the back of this page. If you have any questions contact your eligibility worker immediately.

ELIGIBILITY WORKER _____

PHONE NUMBER _____

(see reverse side)

Income considered for Food Stamp purposes is that which is received or is anticipated to be received during the certification period.

ACCEPTABLE VERIFICATIONS FOR INCOME

The actual check, copy of check, or written or verbal statement from issuing person, agency, etc., will be acceptable proof for income EXCEPT FOR THE FOLLOWING ITEMS:

1. Earned Income or Wages - five most recent consecutive pay stubs or envelopes; or three most recent consecutive stubs if five are not available for reasons beyond your control (for example, new job, recent sick time or strike, or unawareness that stubs would be needed); if less than three stubs are available, written statement from employer or other persons who have knowledge of the household's income (written statements must include gross pay and mandatory deductions).
2. Self-Employment - most recent 1040 Federal Income Tax Form, quarterly declaration of income tax, and/or your complete bookkeeping records of your business transactions.
3. Rental Income - rent receipt records, or state or federal tax returns.

Deductions considered for Food Stamp purposes are those which are paid or are anticipated to be paid during the certification period.

ACCEPTABLE VERIFICATIONS FOR DEDUCTIONS

The actual bill, copy of bill, cancelled check, receipt, money order, copy of agreement to pay (contract or lease) or written statement from the party to whom the payment is made or is anticipated to be made during the certification period will be acceptable proof for deductions EXCEPT FOR THE FOLLOWING ITEMS:

1. Federal Income Tax Withholding, State Income Tax Withholding, F.I.C.A. (Social Security Withholding), Retirement (Mandatory) - same proof as required for earnings will be acceptable.
2. Union Dues - pay stubs, written or verbal statement from union or employer or client's union book will be acceptable.
3. Alimony/Support Paid - court order or written statement from attorney who handled divorce or separation, AND receipts, cancelled checks, money orders, probation or agency records, or written statement from spouse or former spouse.
Note: the actual payments made in one consecutive 30 day period in the 60 days prior to application or recertification will determine the amount to be allowed monthly for the length of the certification period. Voluntary contributions and any payments in excess of the court order are not to be counted.

OTHER ACCEPTABLE VERIFICATIONS

Other verifications may be required when information provided is incomplete, inconsistent, or contrary to other information given.

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE
FOOD STAMP PROGRAM

NOTICE OF DENIAL/CLOSING

DATE: _____

NAME _____

ADDRESS _____

DEAR APPLICANT:

☐ Your most recent Food Stamp Application is denied effective _____ (DATE)
for the following reason(s): _____
(INCLUDE MANUAL CITATION)

☐ Your Food Stamp case is closed effective _____ (DATE) for the following
reason(s): _____
(INCLUDE MANUAL CITATION)

If you disagree with this decision, you have the right to a fair hearing before a referee of the Department of Public Welfare. You may exercise this right by filing a request for a fair hearing within 30 days of this notice. If you wish to request a fair hearing complete the reverse side of one copy of this letter. Retain the second copy for your own information.

CHANGE IN HOUSEHOLD: YOU HAVE THE RIGHT TO MAKE AN ACTUAL CHANGE IN YOUR HOUSEHOLD COMPOSITION AND FILE A NEW APPLICATION. You may benefit from further discussion with an eligibility worker. (FSP-2B enclosed)

Nondiscrimination: You are entitled to Food Stamps, if eligible, without regard to race, color, religious creed, national origin or political beliefs.

ELIGIBILITY WORKER

TELEPHONE NUMBER

DEPARTMENT USE ONLY

REGION

OFFICE

CATEGORY

SOCIAL SECURITY NO.

CASE ASSIGNMENT NO.

Department of Public Welfare
Division of Hearings
600 Washington Street
Boston, Massachusetts 02111

REQUEST FOR A FAIR HEARING

Federal Regulations provide that if you are not satisfied with any action by the Department of Public Welfare, you have the right to appeal and receive a fair hearing before a referee of the Division of Hearings. The request for a fair hearing must be received by the Department within thirty (30) days of the official written notice to you of action by the Department which includes a statement on the right of appeal and time limit for appealing. PLEASE SEND COMPLETED FORM TO ABOVE ADDRESS.

Within five days after the Division of Hearings receives your request, you will be notified of the time, date and place of your hearing. If you are unable to attend the fair hearing, please contact the Division of Hearings at 727-6050 as soon as possible so that your fair hearing can be rescheduled. Failure to appear at the fair hearing without good cause may result in termination of the appeal.

At the fair hearing, you or another household member, may appear personally and may be accompanied by an attorney or other representative at your own expense. You may wish to contact a local legal service office or community agency which will provide advice or fair hearing representation at no charge. Information about these services, if available in your area, can be obtained by contacting the Welfare Service Office. You or your representative may subpoena witnesses, present evidence and cross examine witnesses. The referee must make a decision on all of the evidence presented at the hearing and only the evidence so presented. You or your representative will be permitted to see your written record prior to the hearing if you so desire.

I _____ hereby request a fair hearing
before a referee of the Division of Hearings. The reason I wish to request a fair
hearing is _____

NAME _____ TELEPHONE _____

ADDRESS _____ CITY/TOWN _____

SIGNATURE _____ DATE _____

My authorized representative is:

NAME _____ TITLE _____

ADDRESS _____ TELEPHONE _____

Outreach for NPA Cases Being Denied/Closed

DO YOU KNOW

You may have been found ineligible because the income or resources of your "household" are too high. You have the right to file an appeal on that decision as explained on the Notice of Denial/Closing (FSP-2A).

You should know that the income and resources only of the members of your "household" (as defined by the Food Stamp Program and as demonstrated clearly by you to the eligibility worker) are counted in determining Food Stamp eligibility.

YOU HAVE THE RIGHT TO MAKE AN ACTUAL CHANGE IN YOUR HOUSEHOLD COMPOSITION AND FILE A NEW APPLICATION. This may allow some persons living with you to be found eligible as well as yourself, even though others (who now become non-household members or members of their own households) have been denied eligibility.

To have other persons who live with you considered to be members of your household for Food Stamp purposes, they must share your cooking facilities and also be members of your economic unit.

1. Use of common cooking facilities - If an individual (son, daughter, roommate, etc.) who lives with you does not share your cooking facilities (for example- he has his own cooking facilities like a hot plate on which he prepares his meals), HE IS NOT A MEMBER OF YOUR HOUSEHOLD FOR FOOD STAMP PURPOSES and his income and resources are not counted in determining the eligibility of your household.
2. Membership in an economic unit - If an individual (son, daughter, roommate, etc.) who lives with you is not a member of your economic unit (for example - he is a roomer, boarder, or only shares shelter costs, but keeps his income and resources separate for his own use), HE IS NOT A MEMBER OF YOUR HOUSEHOLD FOR FOOD STAMP PURPOSES and his income and resources are not counted in determining the eligibility of your household.

These were just a few examples. There are other possibilities for households with more than one member. If you think these possibilities may exist in your household, contact your local Welfare Service Office as soon as possible. An eligibility worker will discuss your situation and help you.

REMEMBER, once you make an ACTUAL change in your HOUSEHOLD COMPOSITION and file a new application, YOU HAVE TO DEMONSTRATE CLEARLY TO THE ELIGIBILITY WORKER THAT THE CHANGE HAS OCCURRED.

If you are a single-member household or a married couple, there is probably no way to make a change in your household composition. However, if there are changes in your economic situation, do not hesitate to reapply.

NOTE: If any individual living with you does not share your cooking facilities or is not a member of your economic unit, he may be eligible for Food Stamps on his own.

(9) NOTICE OF RECERTIFICATION REQUIREMENT (FSP-12)

- MANDATORY** - In order to insure a household's timely application for continued participation in the Food Stamp Program, the Department shall forward the original of Form FSP-12 to households certified for three months or longer. This notice must be sent by the Department not less than seven (7) days and not more than twenty-one (21) days prior to household recertification interview. A duplicate copy of Form FSP-12 sent to the household shall be filed in the case record. The recertification interview must be completed fifteen (15) days prior to the last day of the current certification period in order to avoid interruption in the benefits, and to prevent technical problems such as Forward Adjustments. Claim Determinations or the continued participation of ineligible households in the Food Stamp Program.
- OPTIONAL** - Additional information may be attached to the Form FSP-12. Form FSP-12 may be sent to households certified two (2) months or less.

(10) PENDING VERIFICATION LETTER (FSP-15)

- MANDATORY** - In order to remind a household of verifications outstanding at time of a certification interview, the household shall be given the original of Form FSP-15 with the necessary verifications checked off. A duplicate copy shall be filed in the case record to serve as a reminder to the eligibility worker that verifications are outstanding.
- OPTIONAL** - None.

(11) NOTICE OF DENIAL/CLOSING (FSP-2A)
AND OUTREACH FOR NPA CASES BEING DENIED/CLOSED (FSP-2B)

- MANDATORY** - If a household fails to respond to a recertification notice, or is ineligible at time of an initial or subsequent certification, the ineligible household shall be sent an original and one copy of Form FSP-2A with Form FSP-2B(Outreach for NPA Cases Being Denied/Closed) at the time denial/closing action is taken, with copy of FSP-2A to the case record. The FSP-2A must contain:

- a. The effective date of denial or closing
- b. The reason for denial or closing including the manual citation. Proper citation for failing to show or contact WSO is "Food Stamp Program Certification Handbook, Page 126, Paragraph 2410 - End of Certification Period."

FSP-2A is not an advance notice prior to action. Advance notice requirement is met by FSP-12, Notice of Recertification Requirement.

Note: Form FSP-5 (Advance Notice of Change) and FSP-6 (Notice of Change) are not used at recertification. These forms are used only for changes that occur within the certification period (desk reviews).

- OPTIONAL** - None.

FAST ISSUANCE OF ATP'S FOR FOOD STAMP HOUSEHOLDS

This Supplement distinguishes between normal handling and emergency handling of Food Stamp applications and reapplications depending on the circumstances of the households.

The Department will inform all applicants about the availability of these procedures.

I. NPA HOUSEHOLDS

A. Normal Certification Households - The majority of Food Stamp eligible households fall into this category. The households are certified within a 30 day period and receive their first Authorization To Purchase (ATP) in the month following the date of application. These households have adequate income or resources to maintain them during the waiting period. Normal handling procedures are to be followed.

B. Special Certification Households - No gross income or very low gross income households eligible for food stamps at no cost. ~~These have little or no liquid resources to draw upon in the period spanning application to receipt of a computer issued ATP.~~

Household must meet 1,500 resource Limitation.

In order to expedite emergency certification for these households, the following over-the-counter procedures are to be used:

1. Each WSO and ATP Issuance Office must designate individuals and back-ups for handling the over-the-counter issuance procedures.
2. Special consideration in the application procedures will be given if appointments are used, or where undue delay would be encountered in a first serve situation.
3. Priority eligibility determination and speedy supervisory approval are required. Paragraph 2313 of the Massachusetts Food Stamp Certification Handbook may be utilized.
4. The Eligibility Worker will complete Form FSP-14 Over-the-Counter ATP Request Form in triplicate for the calendar month in which the household applies. The original and first copy is given to the office designee who either completes the ATP or transmits the information from the Form FSP-14 to the Issuance Office so that an over-the-counter ATP can be created the same day. The last copy is placed in the case folder.
5. The Eligibility Worker will complete the computer entry document (TD) and forward it to the fiscal clerk who will forward it to the RDCU to establish the household on the computer for ATP reconciliation purposes as well as to provide for the household to receive a computer generated ATP in the following month.

The TD must have a food stamp start date of the first of the month following the date of application to insure that a second ATP will not be issued by the computer during the month of application. The TD "Remarks" section shall include the notation "Over-the-Counter ATP Issued".

6. The WSO will provide the emergency household with an Identification Card (FSP-3). The household shall be presented with the option of picking up the ATP from the Issuance Office, courier service to the local office from the Issuance Office when available and useful, or having the ATP being placed in that day's mail by the Issuance Office.
7. The Issuance Offices will establish a time cut-off, not before 3 P.M., for these procedures to allow completion of the ATP document.
8. If courier service is not used, the Issuance Office designee will insure that the ATP will be placed in the mail if the emergency household or its representative does not pick it up at the Issuance Office prior to the latest available mail pick-up time in the particular community.

II. PA HOUSEHOLDS

An Entry Payments worker or member of the supervisory staff must ask the applicant if (s)he is in immediate need of food. If (s)he is, the worker must interview the applicant; and, if (s)he appears eligible for AFDC or GR and if (s)he is eligible for Food Stamps at zero purchase level; the worker must provide an over-the-counter ATP to the applicant. If the applicant is in need of food and is not eligible for an over-the-counter ATP, a food voucher may be provided as an advance on the first AFDC or GR payment in accordance with the provisions of the AP manual, Section 302.09 (AFDC) and Section 311.110 (GR).

- A. Normal Certification Households - The households are certified within a 30 day period and receive their first Authorization to Purchase (ATP) in the month following the date of application. These households have adequate income or resources to maintain them during the waiting period. Normal handling procedures are to be followed.
- B. Special Certification Households - The majority of Food Stamp PA eligible households fall into this category. The household has no gross income or very low gross income and is eligible for food stamps at no cost. ~~The household also has little or no liquid resources to draw upon in the period spanning application to receipt of a computer issued ATP.~~
"Household must meet resource eligibility requirements,"

NOTE: Income does not include the PA grant since the first PA check is generally not issued until the calendar month following the month of application.

In order to expedite emergency certifications for these households, the following over-the-counter procedures are to be used:

1. Each WSO and ATP Issuance Office must designate individuals and back-ups for handling the over-the-counter issuance procedures.
2. Special consideration in the application procedure will be given if appointments are used, or where undue delay would be encountered in a first come first serve basis.
3. Priority eligibility determination and speedy supervisory approval are required. Paragraph 2313 of the Food Stamp Certification Handbook may be utilized. However, its utilization should not prevent same day issuance of the ATP.

NOTE: Verification of residence will be required if the household's ATP is not mailed. Other verification requirements are unchanged in determining subsequent ATP issuance. See the Food Stamp Certification Handbook and Supplement II.

4. The Eligibility Worker will complete Form FSP-14 Over-The-Counter Request ATP Form in triplicate for the calendar month in which the household applies. The original and one copy is given to the office designee who either completes the ATP or transmits the information from the Form FSP-14 to the issuance office so that an over-the-counter ATP can be created the same day. The last copy is placed in the case folder.
5. The issuance of an initial PA over-the-counter zero purchase ATP is done as the result of a presumptive eligibility certification period for the month of application. This is to be followed by two additional certification periods, one for the second month only and one for the months thereafter. Therefore, at the time of final eligibility determination and budget computation, two Food Stamp Worksheets (FSP-1B) and two of Form SS9F must be completed.

The first Worksheet computation is for the second month of Food Stamp eligibility and must include the regular monthly income **as well as the** retroactive amount accrued during the first month of application when the zero purchase ATP was issued. The SS9F for this Worksheet must have a start date of the first of the month following the date of application to insure that a second ATP is not issued by the computer during the month of application. The SS9F Remarks Section shall include the notation "over-the-counter ATP issued".

The second Worksheet computation will be for the third month as well as the remainder of the certification period and will be based on the regular monthly income for the remainder of this period. The SS9F for this Worksheet will be marked as a change in Block 8 and the notation "Second SS9F" shall be written in the Remarks Section. Both SS9F's shall be forwarded to the fiscal clerk.

Two of Form FSP-2 Notice of Eligibility must be completed, one for the second month, one for the remainder of the certification period. Both FSP-2's are to be mailed to the recipient together.

EXAMPLE

A woman and three children apply for AFDC in September. Household is judged to be presumptively eligible and in dire need. The only income will be the AFDC budget and quarterly flat grant.

FSP-1A is completed by Intake Worker.

FSP-14 is completed by Intake Worker and is immediately given to designee for ATP issuance.

First FSP-1B (Worksheet) is completed reflecting Gross Income for second month, October, (Monthly grant and flat grant plus retroactive grant and flat grant amount for application month.)

Second FSP-1B is completed reflecting Gross Income for third month, November, through remainder of certification process.

SS9A is completed when final eligibility is determined creating the AFDC case.

First SS9F, with start date of the first of the month following date of application is completed reflecting information for second month, October, purchase requirement.

Second SS9F, marked change in Block 8, is completed reflecting the purchase requirement from the third month, November, and through the rest of the certification period.

NOTE: This second SS9F will be held by the fiscal clerk until it has been assured that the first SS9F has been picked up by the computer.

Two copies of the FSP-2 will be sent to the recipient at the same time. The first will notify the client of the Purchase Requirement for the second month, October, only. The second will notify the client of the Purchase Requirement from the third month, November, through the end of the certification period.

6. The fiscal clerk will batch the SS9A and new SS9F's and forward them to the RDCU no later than the next working day.
The "change" SS9F's must be held by the fiscal clerk until after the first of the next month ATP issuance.
7. The WSO will provide the emergency household with an identification card (FSP-3). The household shall be presented with the option of picking up the ATP from the issuance office, courier service to the local office from the issuance office when available and useful, or having the ATP being placed in that day's mail by the Issuance Office.
8. The Issuance Offices will establish a time cut-off, not before 3 P.M., for these procedures to allow completion of the ATP document.
9. If courier service is not used, the Issuance Office designee will insure that the ATP will be placed in the mail if the emergency household or its representative does not pick up at the Issuance Office prior to the latest available mail pick-up time in the particular community.

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WELFARE
OFFICE OF ASSISTANCE PAYMENTS
FOOD STAMP PROGRAM

FOOD STAMP PROGRAM CERTIFICATION HANDBOOK
SUPPLEMENT VIII

REPLACEMENT OF ATP'S IN ORIGINAL AMOUNTS

A. General Information

PA and NPA recipients shall have their Authorizations to Purchase (ATP's) replaced over-the-counter in original amounts for the current month for the reasons described in B below.

The Department will inform all recipients about the availability of these procedures.

B. Conditions of Entitlement for Replacements

1. The original ATP was lost or never received.
2. The original ATP was stolen.
3. The original ATP was so mutilated as to be unusable.
4. The recipient must report the loss in the month in which it occurred.
5. The recipient must sign a Statement of Loss Form (FSR-1) where he attests that the information that he gives is correct and true. (Intentional cashing of both the original and replacement ATP's constitutes fraud, for which the recipient may be criminally prosecuted.)

C. Procedures For Replacements

1. Each WSO and ATP Issuance Office must designate individuals and back-ups for handling the Over-the-Counter Issuance procedures.
2. If a recipient reports that his ATP has been stolen, he is to be informed that he should notify the police.
3. If a recipient reports an undelivered ATP, the Eligibility Worker will check the ATP Issuance Reports FSP-026 and FSP-027, except in the case of replacing previously issued over-the-counter ATP's, to be sure the ATP was issued, and then allow two extra days beyond mail delivery date for possible mail service delays, except in cases where a delay of one or more days will result in undue hardship to the household. In such instances the ATP will be replaced on the day of the household's request.

If the ATP was never issued, the Eligibility Worker will take corrective action, including the giving of an over-the-counter ATP, if appropriate.

4. If the replacement is for a mutilated ATP, the Eligibility Worker will mark "VOID REPLACED BY OVER-THE-COUNTER ATP" on the original ATP and attach it to the copy of the FSP-14 that is given to the office designee.
5. If an Over-the-Counter issued ATP is being replaced, the Eligibility Worker will write "Over-the-Counter" in the block "ATP NO." of the FSR-1.
6. The Eligibility Worker must have the recipient fill out the Statement of Loss Form (FSR-1). He will explain to the recipient that the FSR-1 must be signed and witnessed, and that the recipient is attesting to the fact that the ATP was not cashed by the recipient (or on behalf of the recipient) and if he receives or recovers the original ATP, he will return the ATP to the WSO.
7. The FSR-1 should be completed in duplicate with the original given to the recipient and the copy being placed in the case folder. The computer entry portion of the form need not be completed.
8. The Eligibility Worker will completed Form FSP-14 Over-the-Counter ATP Request Form in triplicate and forward the original and first copy to the office designee who either completes the ATP or transmits the information from the Form FSP-14 to the issuance office so that an over-the-counter ATP can be created the same day. The last copy is placed in the case folder.
9. The household will be presented with the option of picking up the ATP from the issuance office, courier service to the local office from the issuance office when available and useful, or having the ATP being placed in that day's mail by the Issuance Office.
10. The Issuance Office will establish a time cut-off, not before 3 P.M., for these procedures to allow for completion of the ATP document.
11. If courier service is not used, the Issuance Office designee will insure that the ATP will be placed in the mail if the emergency household or its representative does not pick it up at the Issuance Office prior to the latest available mail pick-up time in the particular community.

D. Potential Overutilization

1. In situations where the Eligibility Worker has sound reason to doubt the validity of the claim, as in instances of recurring reports of lost ATP's, the matter should be referred to the WSO Director or his designee for a decision on replacing the ATP.
2. The redeeming for food coupons of both the original and replacement ATP's will appear in the Overutilization Report (FSP-248) that is distributed to Regional Offices. When overutilization occurs, then a Claim Determination must be initiated as prescribed in Supplement V of the Food Stamp Certification Handbook.

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WELFARE
OFFICE OF PUBLIC ASSISTANCE
FOOD STAMP PROGRAM

FOOD STAMP PROGRAM CERTIFICATION HANDBOOK
SUPPLEMENT IX

REPLACEMENT OF INCORRECT ATP'S IN CORRECTED AMOUNTS

A. General Information

PA and NPA recipients can under circumstances described in B have their Authorizations to Purchase (ATP's) replaced over-the-counter in corrected amounts to which the recipients are entitled by returning their whole month's ATP and having it reissued in corrected amounts. This procedure may be used instead of crediting the recipient with a cash refund or forward adjustment or both, or requiring a claim determination in the case of overparticipation.

The Department will inform all recipients about the availability of these procedures.

B. Conditions of Entitlement for Replacements

1. Agency Delay - According to paragraph 2404.2 of the Food Stamp Program Certification Handbook, the Eligibility Worker must make recipient initiated changes effective for not later than the first issuance period following ten (10) days from the date notification was received. Failure of the Department to meet that minimum requirement will entitle the household to select this procedure for replacement of ATP's in corrected amounts.
2. Agency Error - An incorrect coupon allotment or purchase requirement due to agency error other than B-1 above will entitle the household to select the above procedure for replacement of ATP's in corrected amounts.
3. Changes - Households which have a change in circumstances that makes them eligible for a zero purchase requirement ATP in the month of request shall be eligible for the above procedure for replacement of ATP's in corrected amounts.

C. Procedures for Replacements

1. Each WSO and ATP Issuance Office must designate individuals and back-up for handling over the counter issuance of ATP's.
2. The household must ~~surrender~~ both parts of the ATP originally issued for the current month and sign a Request for Correction or Exchange of ATP (FSR-6) at the WSO. The FSR-6 is completed in duplicate with original given to the recipient, the duplicate being placed in the case folder. The computer entry portion of the FSR-6 need not be completed (See Item #6).

3. The Eligibility Worker will complete Form FSP-14 Over-the-Counter ATP Request Form in triplicate for the month in which the household applies. The original and one copy is given to the office designee who either completes the ATP or transmits the information from the FSP-14 to the issuance office so that an over-the-counter ATP can be created the same day. The last copy is placed in the case folder.
4. The household will be presented with the option of picking up the ATP from the issuance office, courier service to the local office from the issuance office when available and useful, or having the ATP being placed in that day's mail by the issuance office.
5. The Eligibility Worker will mark " Void - Replaced by Over-the-Counter ATP" on the original ATP and attach it to the copy of the FSP-14 that is given to the office designee.
6. The Eligibility Worker will complete the SS9F (and SS9A if needed) to correct the next month's ATP issuance. The SS9F remarks section shall include the notation "Over-the-Counter Correctd ATP Issued".
7. Any forward adjustment deducted from the original ATP will have to be resubmitted to the RDCU by means of the SS9F form.
8. The Issuance Office will establish a time cut-off, not before 3 P.M., for these procedures to allow for completion of the ATP document.
9. If the recipient or his representative does not pick up the ATP at the Issuance Office prior to the latest available mail pick-up in the particular community and courier service is not used, the Issuance Office designee will insure that the ATP will be placed in that day's mail.

POLICY AND PROCEDURE FOR IMPLEMENTATION OF THE RETROACTIVE PORTION
OF THE AIKEN COURT ORDER

I. Authority

The authority for these regulations is a court order issued by the United States District Court for the Eastern District of California in Aiken vs. U.S.D.A. et al. This court case is also referred to as Aiken vs. Butz and Aiken vs. Obledo.

II. Introduction

The court order issued as a result of the Aiken vs. U.S.D.A. case in California required changes in food stamp policy that:

1. deleted the collateral contact requirement for certification pending verification,
2. deleted the provision that certification pending verification be allowed only once in a six month period, and,
3. deleted the "little or no liquid resource" requirement.

These policy changes are retroactive to August 5, 1974.

This supplement gives instructions on who is eligible for benefits under this retroactive policy change and how those benefits are to be provided.

III. Definitions

A. Retroactive Benefits for purposes of this supplement are food stamps owed to households because their food stamps were delayed or not received, because of policy in effect from August 5, 1974 to May 1, 1978, that was changed by the court order issued in Aiken vs. U.S.D.A.

B. Delayed Benefits are food stamps that were not received by a household in the same calendar month that they were applied for.

C. Never Received Benefits are food stamps that households did not receive because:

1. their application was denied due to collateral contact requirement or because the household had already received certification pending verification once in a six month period,
2. the household did not apply for food stamps because of the collateral contact requirement or because they had already received certification pending verification once in a six month period.

IV. Eligibility

A. To be eligible for these benefits, a household must:

1. request these benefits (orally or in writing),
2. complete and sign the application for retroactive benefits. A separate application must be completed for each month, (FSP-17),
3. provide verification of income for the time period for which they are applying or sign a statement as to the validity of those facts presented which are necessary to determine eligibility, (FSP-18) and,
4. have been eligible at the zero purchase level.

B. To determine eligibility:

1. for those households who are applying because of delayed benefits, a worker must:
 - a. check case record or application log (if possible) for date of application and to see if applicant was eligible at zero purchase level,
 - b. check computer printout issuance records for date of issuance (FSP-026 or FSP-027), if possible. If these are not available rely on applicant's sworn statement,
 - c. for all households that apply for these benefits for any month after August 1976, check case record to determine if an Over-the-Counter ATP was issued. If an OTC was issued the household would not be eligible.
2. For those households who are applying because of never received benefits, a worker must:
 - a. check case records (if possible) for those households that were denied to see if reason for denial was due to requirement for collateral contact or that household had already received certification pending verification once in a six month period,
 - b. determine from information given by applicant that household would have been eligible at zero purchase level,
 - c. determine number of months client would have been eligible for these benefits,

- d. determine if information obtained through a collateral contact had shown applicant to be ineligible at time of previous application, if so, applicant is not eligible for these retroactive benefits. These retroactive benefits may not be denied solely on the basis of lack of verification, and,
 - e. applications for each month must be considered independently. There is no automatic continuation of benefits.
3. For those households that lived in a different area during any month for which they are applying:
- a. within Massachusetts, contact CSAO/WSO that covers area in which applicant resided to obtain necessary information to process the application;
 - b. outside of Massachusetts, send copy of application form to state in which applicant resided. Ask the other state to determine eligibility and to forward an FNS-286 if applicant was eligible. Ask the other state to forward the reason if applicant is ineligible;
 - c. if contacted by another state, send a completed form FNS-286 to state if applicant is eligible or reason if applicant is ineligible.
- C. Eligibility must be determined within thirty (30) days of the date the applicant provides verification of income or signs the statement in place of verification.

V. Notification

A. Worker must notify household of:

- 1. Approval. Send one copy of attached approval letter (FSP-20) to household, file one copy in case record, or
- 2. Denial. Send two (2) copies of attached denial letter (FSP-19) to household, file one copy in case record.

VI. Issuance

- A. Determine amount to be issued by multiplying the current coupon allotment for the appropriate household size times the number of months.
- B. For households who are currently eligible, do a forward adjustment for amount of benefits owed.
- C. For households who are not currently eligible:

SUPPLEMENT XI

Page 4

1. issue an OTC-ATP to all households who are eligible for only one month's coupon allotment,
2. complete a Turnaround Document (using normal procedures) putting households on the Master Recipient File if they are eligible for more than one month.
 - a. Determine number of months it will take to issue amount owed.
 - b. The date by which these benefits will be issued should be entered into block 45. (For example, in May 1978, it is determined that household is owed three months worth of coupon allotment. If case is put on file in time to receive an ATP in May 1978, the date in block 45 should be 07-31-78. If TD is entered so that first ATP is issued in June 1978, the date in block 45 should be 08-31-78.)

NOTE: Some of these households may receive computer generated FSP-12 (Recertification Notice). However, this will not actually be the end of a certification period. There is no certification period because these households are not currently eligible. The use of block 45 will prevent further issuance after the amount owed the household has been issued.

- c. Enter "Aiken" in block 83 - Remarks.

VII. Fair Hearings

Households have the right to a fair hearing for benefits denied under this policy.

APPLICATION FOR RETROACTIVE FOOD STAMP BENEFITS

UNDER AIKEN vs. USDA COURT ORDER

NOTE: If you are unable to verify income or deductions for the time period for which you are applying, you must sign an affidavit form.

I. Check which of the following applies to your situation.

_____ I believe my food stamp benefits were delayed because
_____ I did not get my free stamps in the same month I applied.

_____ Because I thought there would be difficulty or delay in obtaining verification of my need for free food stamps,
_____ I did not apply or applied but did not follow up on my application. Therefore, I believe my food stamp benefits were improperly denied.

II. Period you are applying for (after August 5, 1974). A separate application must be completed for each month. _____

III. Complete the following for the time period for which benefits are requested.

1. HEAD OF HOUSEHOLD _____

2. SOCIAL SECURITY NUMBER _____ 3. PHONE NUMBER _____

4. ADDRESS (during period applied for) _____

5. CURRENT ADDRESS _____

6. LIST ALL HOUSEHOLD MEMBERS EXCEPT ROOMERS, BOARDERS, AND LIVE-IN ATTENDANTS:

	<u>Name</u>	<u>Birthdate</u>	<u>Relationship</u>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____
f.	_____	_____	_____

7. RESOURCES: List below the resources owned by head of household and any other household member. Resources include cash, property, etc. The resource must have been owned during the period for which this application is being completed.

Name	Resource	Value	Property
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. INCOME: Income includes, but is not limited to, public or general assistance payments, pension payments, cash gifts, awards and prizes, self-employment income, wages, dividends and interest, alimony, farm income, scholarships, educational loans, etc.

Name	Source of Income	Gross Amount	Taxes	Deductions Social Security	Other
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

9. DEDUCTIONS - MONTHLY

a. Shelter Expenses

(1) Rent	_____	(6) Sewage Disposal Fees	_____
(2) Heating and Cooking Fuel	_____	(7) Property Taxes	_____
(3) Electricity	_____	(8) House Insurance	_____
(4) Telephone	_____	(9) Special Assessments	_____
(5) Water	_____	(10) Total	_____

b. Medical Expenses

(1) Physician & Dental Services	_____
(2) Hospital or Nursing Care	_____
(3) Health Insurance/Medicare	_____
(4) Prescription Drugs	_____
(5) Other (specify)	_____

c. Other

(1) Tuition and Mandatory Fees	_____
(2) Child Care	_____
(3) Court Ordered Child Support or Alimony	_____

(4) Replacement or repair of
property damaged or lost
through unusual circumstances

(5) Funeral Expenses

(6) Total

10. CERTIFICATION:

I certify that this application has been examined by me (or read to me) and that the information is true and correct to the best of my knowledge and belief. I agree to cooperate fully with the state and federal personnel in a Quality Control review. I also agree to provide the Welfare Department information necessary to verify any statements given in this application and hereby give permission to obtain such information.

I understand that I have a right to a hearing if I am not satisfied with the action taken on my application by the Food Stamp Office.

Before you sign your name go back and check to see that each item that applies to your household has been answered correctly.

Signature (Head of Household)

NONDISCRIMINATION: This application will be considered without regard to race, color, religious creed, national origin, or political belief.

PENALTIES FOR FRAUD: The State and Federal Law provides penalties including a fine, imprisonment, or both for persons found guilty of obtaining food stamps for which they are not eligible by making false statements.

Anyone who aids another person to obtain food stamps fraudulently is subject to the same penalties.

AFFIDAVIT FOR RETROACTIVE BENEFITS UNDER THE
AIKEN VS. USDA COURT ORDER

I hereby certify, under penalty of perjury, and/or fraud,
that the facts stated on my application for retroactive
benefits under the Aiken vs. USDA court decision and the
facts listed below are correct.

The unverifiable and/or incomplete facts listed on my
application which must be used to determine my eligibility
are as follows:

I understand that any unauthorized use, transfer, acquisition,
possession, or presentation of food coupons may subject me
to legal prosecution. I give permission for you to verify
my household situation and my financial circumstances.

Date

Signature of Applicant

Signature of EW

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE
FOOD STAMP PROGRAM
NOTICE OF DENIAL OF BENEFITS UNDER AIKEN COURT ORDER

Date:

Name: _____

Address: _____

Dear Applicant:

Your application for Food Stamp Benefits under Aiken vs. USDA is
denied effective _____ for the following reason(s):
(Date)

Manual Citation: _____

If you disagree with this decision, you have the right to a fair hearing before a referee of the Department of Public Welfare. You may exercise this right by filing a request for a fair hearing within 30 days of this notice. If you wish to request a fair hearing complete the reverse side of this letter. Retain the second copy for your own information.

NONDISCRIMINATION: You are entitled to food stamps, if eligible, without regard to race, color, religious creed, national origin or political beliefs.

ELIGIBILITY WORKER

TELEPHONE NUMBER

DEPARTMENT USE ONLY

REGION	OFFICE	CATEGORY	SOCIAL SECURITY NO.	CASE ASSIGNMENT NO.
--------	--------	----------	---------------------	---------------------

THE COMMONWEALTH OF MASSACHUSETTS

Department of Public Welfare
Division of Hearings

P.O. BOX 167, Essex Station
Boston, Massachusetts 02112

REQUEST FOR A FAIR HEARING

The General Laws provide that if you are not satisfied with any action by the Department of Public Welfare, you have the right to appeal and receive a fair hearing before a referee of the Division of Hearings. The request for a fair hearing must be received by the Department within thirty (30) days of the official written notice to you of action by the Department which includes a statement on the right of appeal and time limit for appealing. You have 60 days to appeal a Medicaid issue. PLEASE SEND COMPLETED FORM TO ABOVE ADDRESS.

Within five days after the Division of Hearings receives your request, you will be notified of the time, date and place of your hearing. If you are unable to attend the fair hearing, please contact the Division of Hearings at 727-6050 as soon as possible so that your fair hearing can be rescheduled. Failure to appear at the fair hearing without good cause may result in termination of the appeal.

At the fair hearing, you may appear personally and may be accompanied by an attorney or other representative at your own expense. You may wish to contact a local legal service office or community agency which will provide advice or fair hearing representation at no charge. Information about these services, if available in your area, can be obtained by contacting the Welfare Service Office. You or your representative may subpoena witnesses, present evidence and cross examine witnesses. The referee must make a decision on all of the evidence presented at the hearing and only the evidence so presented. You or your representative will be permitted to see your written record prior to the hearing if you so desire.

I _____ hereby request a fair hearing before a referee of the Division of Hearings. The reason I wish to request a fair hearing is _____

NAME _____ TELEPHONE _____

ADDRESS _____ CITY/TOWN _____

SIGNATURE _____ DATE _____

My authorized representative is:

NAME _____ TITLE _____

ADDRESS _____ TELEPHONE _____

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE
FOOD STAMP PROGRAM

NOTICE OF APPROVAL UNDER AIKEN COURT ORDER

Date:

Name: _____

Address: _____

Dear Applicant:

This is to notify you that your application for retroactive food stamp benefits under Aiken vs. USDA (Obledo) has been approved.

You will receive \$ _____ worth of food stamps which covers _____ month(s).

☐ Because you are currently eligible this amount will be issued to you by increasing your monthly coupon allotment until the above amount is used up.

☐ You are not currently receiving food stamps. An Authorization to Purchase food stamps for the one month's allotment that is owed you is enclosed.

☐ You are not currently receiving food stamps. A computer issued Authorization to Purchase (ATP) food stamps will be mailed to you each month with a coupon allotment of \$ _____. You will receive an ATP on or about the first of each month for _____ months. The last ATP you will receive will be for the month of _____. You may receive a Notice to Appear for Recertification. Because you are not certified for this current period and are receiving retroactive benefits only, you will not have to appear for recertification.

SEE THE BACK OF THIS LETTER FOR INFORMATION ABOUT THE ATP AND YOUR IDENTIFICATION CARD.

YOUR APPEAL RIGHTS - If you feel that the above decision is incorrect for any reason, you have the right to a Fair Hearing. You must request this hearing within thirty days of the date of this letter. Forms for this purpose (Appeal Blank SS-10) are available at any office of the Department of Public Welfare.

WORKER: _____ PHONE NUMBER: _____

NONDISCRIMINATION: You are entitled to Food Stamps, if eligible, without regard to race, color, religious creed, national origin, or political beliefs.

HERE'S WHAT A TWO-PART "ATP" LOOKS LIKE

**COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WELFARE
AUTHORIZATION TO PURCHASE FOOD COUPONS**



REGION		OFFICE		CATEGORY		CARD HOLDER NUMBER	
5	151	9	4444444444				
VALID FROM		12 / 01 / 75		TO		12 / 31 / 75	

**COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WELFARE
AUTHORIZATION TO PURCHASE FOOD COUPONS**



REGION		OFFICE		CATEGORY		CARD HOLDER NUMBER	
5	151	9	4444444444				
VALID FROM		12 / 01 / 75		TO		12 / 31 / 75	

77777777777777

77777777777777

NAME

ADDRESS

CITY OR TOWN ZIP CODE

Household Size

05

A

NAME

ADDRESS

CITY OR TOWN ZIP CODE

Household Size

05

B

CHECK PURCHASE OPTION BELOW AND SIGN

OPTION 1 ☐

OPTION 2 ☐

YOU PAY \$45.00

YOU PAY \$22.50

TOTAL STAMPS \$91.00

TOTAL STAMPS \$46.00

SIGNATURE

SIGNATURE

VALID ONLY WITH I.D. CARD

CHECK PURCHASE OPTION BELOW AND SIGN

OPTION 1 ☐

OPTION 2 ☐

YOU PAY \$45.00

YOU PAY \$22.50

TOTAL STAMPS \$91.00

TOTAL STAMPS \$46.00

SIGNATURE

SIGNATURE

VALID ONLY WITH I.D. CARD

- Each part of your ATP can be cashed in at two separate times *or* you can cash in both parts at the same time.
- Each part of the ATP offers a choice of "OPTION 1" or "OPTION 2".
- **OPTION 1** — means you want to buy all the stamps authorized on that part (one half of your monthly allotment).
- **OPTION 2** — means you want to buy half of the stamps authorized of that part (one quarter of your monthly allotment) and will forfeit the remaining quarter of your monthly allotment.
- **ATP'S MUST BE USED WITHIN THE MONTH IN WHICH THEY ARE ISSUED.**
- **FOOD STAMPS ARE GOOD INDEFINITELY.**
- **FOOD STAMPS** are **COUPONS** used exactly like money to buy food at all grocery stores certified by the U. S. DEPARTMENT OF AGRICULTURE. MOST GROCERS ARE CERTIFIED.
- **NONUSE OF ATP CARDS** — the state agency may **STOP** issuing ATP cards if you fail to purchase coupons for three (3) consecutive months. **HOWEVER, YOU MAY REQUEST TO BE ISSUED ATP CARDS ANYTIME DURING THE REMAINDER OF YOUR CERTIFICATION PERIOD BY CONTACTING YOUR LOCAL WELFARE SERVICE OFFICE.**
- **YOU HAVE THE RIGHT TO APPEAL ANY DECISION MADE ABOUT THE AMOUNT YOU PAY FOR STAMPS, OR ANY DECISION WHICH AFFECTS YOUR PARTICIPATION IN THE FOOD STAMP PROGRAM, BY REQUESTING A FAIR HEARING. APPEAL FORMS ARE AVAILABLE AT YOUR LOCAL WELFARE SERVICE OFFICE.**
- Enclosed with this notice (if you have not already received one) is an Identification Card (FSP-3). Please sign it at once. You should present this card when you buy stamps and when you purchase food with stamps. You may go to any Food Stamp distribution point in Massachusetts to purchase your stamps. Some in your area are: _____

INTRODUCTION

This document, the Massachusetts Food Stamp Certification Handbook, has evolved from the U.S. Department of Agriculture (USDA) - Food and Nutrition Service (FNS) Publication No. 732-1, "The Food Stamp Certification Handbook", dated August 5, 1974.

While the U.S. Department of Agriculture's eligibility standards are fixed and binding on the Commonwealth, there are some options allowed to the States in the procedural areas. This handbook represents a combination of mandated eligibility requirements and State selected procedural options.

Comments on this handbook are welcome and should be addressed to: Massachusetts Department of Public Welfare, Division of Policy and Procedures, 600 Washington Street, Boston, Ma., 02111.

~~2000~~ GENERAL PROVISIONS

A. Elimination of Purchase Requirement (EPR)

Effective January 1, 1979 households will be issued the bonus value of their food stamps. The bonus value is the difference between the maximum coupon allotment for the household size and the household's purchase requirement.

Even though households will no longer have a purchase requirement, the EW must continue to calculate the purchase requirement to determine household eligibility and bonus value. Therefore, all references to the purchase requirement will remain in the handbook.

B. Staggered Issuance Schedule

Effective January 1, 1979 the Department will issue the household's monthly Authorization to Participate (ATP) on a staggered issuance schedule. A schedule of issuance dates based on the last digit of the recipient's social security number will replace the present method of issuing all ATP(s) on the first of the month. If an issuance date falls on a Sunday, the ATP will be issued on the preceding Saturday. If an issuance date falls on a legal holiday, the ATP will be issued on a preceding day. This section supersedes any other references in this Handbook to the issuance of ATP(s) occurring only on the first of the month.

The staggered issuance schedule will be phased in over a two month period to shorten the time between issuance of the December and January ATP for recipients whose social security number ends in 4, 5, 6, 7, 8 and 9. In January, ATP(s) will be issued during the first eight days of the month according to chart #1 below.

CHART #1	LAST DIGIT OF SS#	0	1	2	3	4	5	6	7	8	9
	DATE OF ISSUANCE	2nd	2nd	4th	5th	6th	6th	6th	8th	8th	8th

Beginning February 1st, ATP(s) will be issued during the first fourteen (14) days of the month according to chart #2 below.

CHART #2	LAST DIGIT OF SS#	0	1	2	3	4	5	6	7	8	9
	DATE OF ISSUANCE	1st	2nd	4th	5th	7th	8th	10th	11th	13th	14th

2000 GENERAL PROVISIONS2010 PURPOSE

The purpose of the Food Stamp Program is to raise the nutritional level among low-income households whose limited food purchasing power contributes to hunger and malnutrition among members of such households. The process of determining the need for and the level of assistance is the certification procedure. The purpose of this handbook is to provide the WSO/CSA with guidelines for certification procedures.

2011 PRUDENT PERSON CONCEPT

The policies and procedures throughout this handbook are intended to be a guide for food stamp certification and are broadly written within the limits imposed by the Food Stamp Act and Regulations. The policies contained in this handbook are intended to be sufficiently flexible to allow the eligibility worker (EW) to exercise reasonable judgement in executing his responsibilities. It is impossible to write a procedure that will cover every possible contingency that specific cases may present to the EW.

In this regard, the concept of the "prudent person" can be helpful to the EW. The term refers to the reasonableness of the judgements made by an individual in a given situation. In a court case, a person charged with negligence will try to show that his actions were the actions that any reasonable person would take in the same circumstances.

In making a certification decision, the EW should ask himself if his judgement is reasonable, based on his experience and knowledge of the program. For example, if the client's shelter expenses as he states them are out of line with rentals charged in the community, the EW must ask for an explanation. Similarly, it is the EW's responsibility to exercise reasonable judgement in determining if a given number of individuals who apply for food stamps as a single household do in fact fit the Food Stamp Program's concept of an economic unit.

If the EW encounters a problem in a specific case that he feels may necessitate a change in policy or the creation of a new policy, he should refer the matter to his supervisors. The problem might then be referred by the local office to the State agency and it might finally be referred to FNS for disposition. However, if the problem has application to only a specific case or to a limited number of cases and is generally covered by existing policy guidelines, the EW should make a judgement that he can defend as reasonable and prudent.

2020 PROMPT ACTION

The State welfare agency is responsible for the certification of applicant households. The term State agency will mean both the State welfare agency and its local counterpart agencies. The State agency must provide an application for participation in the Food Stamp Program to any person upon request, and must accept an identifiable application when submitted. An identifiable application is an application or affidavit containing a legible name and address that has been signed. The State agency must either approve or deny applications for participation within 30 days from the receipt of an identifiable application. The person making application is responsible for cooperating with the State agency in providing the information necessary for the State agency to make this determination.

2021 PERSONNEL REQUIREMENTS

The State agency will provide the qualified employees necessary to assure that prompt action is taken on all applications and affidavits. The State agency employees used to certify households for participation in the Food Stamp Program shall meet the personnel standards used by the State agency in the certification of applicants for benefits under the federally-aided public assistance programs. Only such qualified State agency employees shall conduct the interview of applicant households required by 2120 and determine the household's eligibility or ineligibility and the level of assistance. In addition, only authorized employees of the State agency or a State issuing agency shall have access to food coupons, authorization to purchase (ATP) cards or other issuance documents.

2022 VOLUNTEERS

Volunteers or other persons not employed by the State agency may be used in certification related activities, but shall not be permitted to conduct the interview required by 2120 or certify as eligible applicant households. The activities in which volunteers and such other persons may be used include outreach activities such as locating potential participants, assisting in program promotion, teaching nutrition education, and providing transportation to the certification or issuance offices. In addition, they may assist households who so desire in completing the application and other forms and in securing the needed verification of information reported on the application. In

2100 APPLICATION PROCESSING

All applications shall be submitted on behalf of a household.

2101 HOUSEHOLD CONCEPT

A household is defined as any one of the following:

- (1) A group of individuals who are living as one economic unit sharing common cooking facilities.
- (2) An individual living alone who purchases and prepares food for home consumption.
- (3) An individual, living with someone else, who purchases, stores, and prepares food for his own home consumption, but is not a member of the economic unit of the person or persons with whom he lives.
- (4) An individual, living with someone else, who purchases, stores, and prepares food for his own home consumption; is a member of the economic unit of the person or persons with whom he lives, but maintains cooking facilities separate from the other members of the economic unit.
- (5) An elderly person (i.e., an individual age 60 or older) who lives alone or only with spouse and who need not have cooking facilities if he participates in a delivered meals program or a communal dining program.
- (6) A narcotics addict or alcoholic who is a resident of a drug addiction or alcoholic treatment and rehabilitation program center and who receives meals through such program center.

2102 NONHOUSEHOLD MEMBERS

The following individuals residing with a household will not be considered household members for determining the household's eligibility or basis of issuance.

2102.1 Roomer

An individual to whom a household furnishes lodging, but not meals, for compensation.

2102.2 Boarder

An individual to whom a household furnishes meals, or lodging and meals, for payment at a monthly rate at least equal to the coupon allotment for a one-person household.

(102.2)

- (1) An individual furnished both meals and lodging by the household, but contributing less than a one-person coupon allotment, will be considered a part of the household. By failing to meet the basic payment, the individual's basic needs are being provided by the household and he will therefore be treated as any other household member.
- (2) An individual furnished only meals but not residing with the household and contributing less than a one-person coupon allotment will not be considered a member of that household and only his actual payment to the household will be included as household income. (See 2262.13).

2102.3 Attendant or Housekeeper

An individual necessary for medical or child care reasons who is not a part of the household economic unit.

2102.4 Ineligible Alien

An individual who does not meet the citizenship or permanent alien status as defined in 2205. However, the income and resources of such individual, if he is not otherwise excluded from the household as a roomer, boarder, or attendant, will be considered available to the household for the purpose of determining eligibility and basis of issuance for the remaining household members (See 2331).

2102.5 SSI Recipients in "Cash-Out" States

Recipients of Supplemental Security Income (SSI) who reside in a State designated by the Department of Health, Education and Welfare (DHEW) to have specifically included the food stamp bonus in its State supplemental payment (See 2323).

2102.6 Student Tax Dependents

A student who is (1) 18 years of age or older, (2) enrolled in an institution of higher education, and (3) properly claimed as a tax dependent for Federal income tax purposes by a parent or guardian who is a member of another household which is not eligible to participate in the Food Stamp Program (See 2240).

2102.7 Others

Other individuals who are not a part of the household's economic unit and do not normally purchase food with the household.

2103 ECONOMIC UNIT

An economic unit is a group of individuals for whom food is customarily purchased and stored in common for use by all members of the group and for whom common living costs (such as, but not limited to, shelter costs) are customarily being met from the income or resources or both available to any individual within the group.

Sharing by a group of individuals of common living quarters and even common shelter costs does not necessarily cause the group to be considered an economic unit. However, such sharing, along with the purchasing of food in common, are factors which strongly indicate that common living costs are shared by the group. Therefore, if any member, or members, of the group wish to be considered as separate economic units, they are responsible for establishing that they do constitute separate economic units.

2104 HEAD OF HOUSEHOLD

The head of household is the person in whose name application is made for participation in the program. Such individual must be a household member except that, if the only adult member of an economic unit is an ineligible alien or an SSI recipient in a cash-out State, such individual may make application on behalf of the household of minors as the head of the household.

2110 APPLICATION PROCESS

Households wishing to participate in the program must make this desire known and provide the State agency with enough information regarding household income and circumstances to make a determination of eligibility. Failure by the household to cooperate with the State agency in providing the information necessary for an eligibility determination can result in denial of the application. The application process consists of an application for participation made by or in the name of the household head, an interview, and required verification and documentation. For purposes of applying for program benefits, households fall into two categories -- public assistance (PA) households and nonassistance (NA) households.

2110.1 PA Households

The following households will be classified as PA households for food stamp certification purposes:

- (1) Households in which all members are receiving directly or on their behalf a federally aided public assistance grant such as Aid to Families with Dependent Children (AFDC).
- (2) Households in which all members are receiving directly or on their behalf a General Relief (GR) grant.
- (3) Households in which all members are receiving either a federally aided PA grant or a GR grant as defined above.
- (4) Households in which all members are PA or GR recipients as defined above and (in non-cash-out states) SSI recipients.

The classification of a PA household will not be affected by the presence of a legally assigned foster child.

2110.2 SSI Households

An SSI Household shall be only those in which all members are SSI recipients or SSI recipients and an essential person as determined in 2325.

2110.3 NA Households

All other households shall be classified as NA households.

2115 PA APPLICATION PROCESS

PA households who apply for food stamp benefits are certified on the basis of an affidavit and information contained in the PA case file. Households which are currently recipients of public assistance may mail in the affidavit. There should be no need for the PA recipient to make a special visit to the office to complete the affidavit. A new affidavit will be required for food stamp purposes each time the PA eligibility is determined.

2116 PA AFFIDAVIT

The application form for a PA household is Food Stamp Program Public Assistance Affidavit (FSP-1A), which provides the PA household with a legal request for certification, and requests certain information which might not be available in the case file. The use of the affidavit will not necessitate a separate application process for PA households as most of the information necessary for certification is known through the PA case file. In most instances the affidavit will be an integral part of the application process for public assistance and should be done at the same time as the application for public assistance is completed.

2117 PA INTERVIEWS

The interview of PA households shall be satisfied by the interview conducted in connection with their certification for public assistance.

2118 PA VERIFICATION AND DOCUMENTATION

The PA case file will serve as verification and documentation. If, however, the EW has any reason to question information in the file or provided in the affidavit, he should verify all such information prior to certification for food stamp benefits. A refusal at initial or subsequent application by the household to provide income information or information necessary for verification must necessarily result in a denial of benefits because no basis is provided from which the coupon allotment or purchase requirement may be determined.

A refusal to cooperate in furnishing information for Quality Control purposes shall result in the EW terminating the food stamp assistance, subject to the usual appeal processes. When such a household reapplies for food stamps, the EW must secure verification for any item for which the household failed to provide verification in order to determine whether that item represents a current resource, income, or other pertinent eligibility factor.

2120 NA APPLICATION PROCESS

To be certified for food stamp eligibility, an NA household must complete an application on the form, Food Stamp Program Application (FSP-1) and co-operate in providing all information necessary for an eligibility determination.

The client may request an application form by telephone, by mail or in person. All applicants must be provided with the application form, FSP-1 and the FSP-1 Cover Letter (instructions to assist the client to complete the application form) at the time they request to participate in the Food Stamp Program. The applicant must file his signed application (FSP-1) with the WSO or the designee of the WSO in order to establish the date of application. That filed application form must remain with the WSO.

Each application must be followed by an interview. Applications by NA households are also subject to verification of facts stated by the applicant and documentation which consists of a written record in the case file of the method used to verify information received from the applicant. The EW must complete the determination of eligibility within 30 days of receipt of a signed application, form FSP-1 by the WSO.

2121 NA APPLICATION (FOOD STAMP PROGRAM APPLICATION FSP-1)

Application for participation by NA households may be completed by the applicant or anyone he chooses. The application must be signed by either the head of the household, the spouse, or the household's authorized representative. The application may be completed in the certification office or may be submitted by mail. Although the application form is designed to be client-oriented and the client is given the FSP-1 cover letter, the EW should assist the applicant in completing the form if requested to do so. The completed application must contain all information necessary to determine a household's eligibility and basis of issuance.

The EW must use the form, Food Stamp Program Worksheet (FSP-1B) to ensure the correctness of computation. If additional sheets are used for computations besides the worksheet, those additional sheets are to be preserved and filed in the case record. The EW must record on the worksheet the disposition of the application and the documented reason for the determination of eligibility or ineligibility.

2122 NA INTERVIEW

It is necessary to interview all NA applicants including those whose application are submitted by mail. While anyone can assist the household in completing the application, only an authorized EW shall interview the applicant who may be the head of the household, the spouse, or the household's authorized representative. Applicants who are unable to come into the office, for good cause as determined by the EW, for a face-to-face interview may be

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interviewed in a home visit or by telephone. When it is necessary to interview the applicant by telephone, the justification for such action must be fully documented in the case file. Mere inconvenience (i.e. it is easier for the client to be interviewed by telephone or to have the EW make a home visit than to go to the WSO) is not considered sufficient justification. No household shall be interviewed by telephone for any two successive certifications without a face-to-face interview in the office or at home.

The purpose of the interview is to establish, to the satisfaction of the EW, that the actual facts of the case are consistent with the statements on the application concerning household income and circumstances and to establish, subject to subsequent verification, whether or not the household is eligible for food stamps assistance. The only successful method of making such a determination is the use of investigative interview techniques to conduct a thorough and searching inquiry into household circumstances. Merely reviewing the application for completeness is no substitute for the investigative interview.

The interview is an official and confidential discussion of household circumstances with the applicant. The applicant should be made to feel at ease during the interview and in all instances the household's right to privacy must be respected. The scope of the interview may not extend beyond the examination of household circumstances which directly relate to the determination of household eligibility and basis of issuance.

During the interview, the EW should be sure that the applicant understands his obligations as a recipient and has a basic understanding of program procedures and aims. The applicant must be advised of his right to appeal the EW's determination if he is not satisfied with the results (see 2500 for Fair Hearings). In addition, the applicant must be advised that eligibility will be determined without discrimination.

2122.1

Interview Management

All applicants are to be promptly interviewed in order for the EW to **approve or deny the application within 30 days from the receipt of the signed FSP-1 at the WSO.**

In any situation where an applicant cannot be interviewed on a walk-in basis, (s)he must be offered the option of a group application session, or be given an appointment for an interview in time to permit processing within the 30 days.

The procedures in Supplement VII must be used for applicants in immediate need of food assistance.

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2123 NA VERIFICATION AND DOCUMENTATION

Prior to determining eligibility for applicant households, sufficient information concerning the applicant's situation must be obtained in order for the EW to make an informed judgement as to the household's eligibility. Verification and documentation are tools for making this judgement and recording the decision-making process in the case file.

2123.1 Verification

Verification means that information has been secured which will establish the accuracy, or lack thereof, of information provided by the applicant.

Gross nonexempt income and mandatory deductions are the minimum verifications required at the initial certification and at subsequent certifications when the amount of this income has changed by more than \$25 or the source has changed. This does not preclude verification of other items necessary to determine eligibility particularly when information provided by the applicant is unclear, incomplete, or inconsistent. The EW should refer to Supplement II and Supplement VI for guidelines to determine when additional verifications are required, and to paragraph 2312 when verifications can be waived.

Sources of verification include documentary evidence, collateral contacts, or home visits. Applicants are primarily responsible for furnishing documents sufficient for verification, or at least information from which the verification may be made by the EW.

A refusal to cooperate in furnishing information for Quality Control purposes shall result in the EW terminating the food stamps assistance, subject to the usual appeal processes. When such a household reapplies for food stamps, the EW must secure verification for any item for which the household failed to provide verification in order to determine whether that item represents a current resource, income or other pertinent eligibility factor.

A refusal by the household to cooperate at time of initial application or re-application in furnishing information required for verification must result

2132 Coupon Purchasing

If the head of the household wishes to name an authorized representative for purposes of purchasing coupons, such designations should be made at the time the application is completed. Any authorized representative should be named on the identification card. The authorized representative for coupon purchases may be the same individual designated to make application for the household or may be another individual. Even if the head of the household is able to make application and purchase coupons, he should be encouraged to name an authorized representative for purchasing coupons in case of illness or other circumstances which might result in inability to purchase coupons. The reverse of the ATP permits the head of the household or spouse to designate in writing in an emergency an authorized representative to purchase coupons with a particular ATP card. A separate written designation is needed each time an emergency authorized representative is used.

The authorized representative, whether he be a household member or a person outside the household, may use coupons to purchase food for consumption on behalf of the household provided he has the household's identification card with the full knowledge and consent of the head of the household or the spouse.

2133 Addict/Alcoholic Representative

Residents of drug addiction or alcoholic treatment and rehabilitation centers must voluntarily elect to participate in the Food Stamp Program. However, those that wish to participate shall be required to apply for food stamps and purchase and use coupons through the nonprofit private organization or institution which runs the center as their authorized representative. The resident household shall assist in completing the application and shall sign the application along with the authorized representative prior to certification. The organization or institution which acts as the authorized representative for resident households shall be responsible for notifying the State agency when a certified addict or alcoholic leaves the center. In addition, the organization or institution shall be responsible for any overissuances which are caused by misrepresentation or fraud committed in the certification of center residents and shall assume the total liability for food coupons held on behalf of resident households.

2134 **Restrictions on Appointment**

Retailers who are authorized to accept food coupons or employees of public welfare departments may not act in any capacity as an authorized representative without the specific approval and determination of the local welfare director that no one else is available to serve.

2135 **Multihousehold Representatives**

An authorized representative may act on behalf of more than one household, but such an arrangement should be approved only if there is a bona fide need. In determining such need, consideration will be given to the proximity of the households to one another, the distance of the certification or issuance office, the availability of transportation, and the health of the household members involved.

2136 **Documentation and Control**

The State agency will assure that authorized representatives are properly designated, that is, the name of the authorized representative and the justification for appointing a person outside the household (if any) shall be maintained as part of the household's permanent case file. In addition, each certification office shall maintain a control system by file card, or other listing, of those authorized representatives who are not members of the household they represent. This system will identify those authorized representatives who represent more than one household and may be used to assure that authorized representatives do not represent more households than is reasonable and prudent. Periodically the listing should be reviewed to assure that all information is current and should be consulted whenever the validity of a designation is questioned.

2200 ELIGIBILITY STANDARD

In January 1971, Congress mandated national uniform standards of eligibility for the Food Stamp Program.

2200.1 Financial Criteria

The Food Stamp Act requires that at a minimum the standards of eligibility for the program prescribe "the amounts of household income and other financial resources, including both liquid and nonliquid assets to be used as criteria of eligibility." The standards established by the Secretary of Agriculture for NA households define those households whose income and resources are substantial limiting factors in permitting them to purchase a nutritionally adequate diet.

The income and resource eligibility standards are not applied to PA households because their "need" has already been determined by their eligibility for such assistance. However, in determining basis of issuance, the same income computation is used for PA households as is used for NA households.

2200.2 Ineligibility of Certain SSI Recipients

In addition to the financial criteria, the Act also specifies that SSI recipients living in States which the Secretary of Health, Education and Welfare has determined are providing State supplementary payments which have been specifically increased to include the value of bonus food coupons shall not be eligible to participate in the Food Stamp Program. Ineligible SSI recipients shall be treated as nonhousehold members in accordance with 2102. Massachusetts is a "cash-out state" as provided in 2323.

2200.3 Nonfinancial Criteria

Nonfinancial eligibility standards apply equally to PA and NA households and consist of:

- (1) Residency in the project area;
- (2) Citizenship or permanent alien status;
- (3) Availability of cooking facilities;
- (4) Prohibition against residency in boarding houses and institutions;
- (5) Work registration;
- (6) Tax dependency;

2201 **RESIDENCY**

All households must live in the project area in which they make application for the program. No household may participate in more than one project area in any month, except as provided for in 2422.2 under the transfer of certification procedures.

2201.1 **Residency Limitations**

When determining residency, the State agency shall:

- (1) Not interpret residency to mean domicile which is sometimes defined as the legal place of residence or principle home;
- (2) Not impose a durational residency requirement;
- (3) Not interpret residency to mean the intent to permanently reside in the State or project area, however, persons in the project area solely for vacation purposes shall not be considered residents;
- (4) Consider as residents all other applicants who are living in the project area for any purpose other than vacation.

2201.2 **Reporting**

The application contains spaces for both a physical address and a mailing address. If the two are different, the EW should require both addresses be given. A mailing address only, such as post office box or a rural route, will not be sufficient as it does not indicate that the household resides in the project area. If the address is a rural route, information should be given which can identify the home, e.g., third house on the right, north of Jones' Market.

2201.3 **Verification**

Verification of residency is required when the information provided by the applicant is unclear, inconsistent, or incomplete or the first ATP is issued over-the-counter. If questionable, the client may supply the verification in the form of documentation such as a driver's license, rent receipt, utility or other recently received bill, voter registration

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terminated by the welfare income maintenance unit by dropping the individual from welfare or by adjustment of the welfare grant. The recipient's AFDC case file may be used to make such a determination of applicability.

2222 Exemptions to Work Registration

The following individuals, between the ages of 18 to 65, are not required to register for employment.

2222.1 Mothers or Other Persons Essential for Care

Mothers or other members of the household who have responsibility for the care of dependent children under 18 years of age or of incapacitated adults.

2222.2 Students

Students who are enrolled at least halftime (as defined by the institution or program in which they are enrolled) in any school or training program which is recognized by any Federal, State, or local government agency.

2222.3 Incapacitated

Persons who are physically or mentally incapable of engaging in gainful employment.

2222.4 Employed

Persons who are working on jobs for at least 30 hours per week.

2222.5 Self-Employed

Self-employed persons where the EW determines that the employment constitutes a full-time job of at least 30 hours per week during the period of certification or an average of 30 hours per week on an annual basis.

2222.6 Addicts or Alcoholics

Any narcotics addict or alcoholic who regularly participates as a resident or nonresident in a drug or alcoholic treatment and rehabilitation program.

2223 Determination of Exemption Status

Determination as to which household members meet the exemption to the registration requirement must be made by the EW at the time of initial certification, subsequent certification, change in employment status, or required 6-month registration period.

In determining whether or not one or more members of the household fall within the exemptions set out above, the following guidelines shall be used:

2223.1 Mothers or Other Persons Essential for Care

If a mother and another member of the household both claim to be responsible for the care of the same dependent children or of incapacitated adults, the actual responsibility should be determined by discussion with the applicant.

2223.2 Students

In the case of students between the ages of 18 and 65, inquiry may be made as to the institution or place of training, whether or not such a school or training program is recognized by a Federal, State, or local government agency, and the time of participation in training in order to meet the halftime requirement. This exemption is not altered due to temporary interruptions in school attendance such as semester or summer vacations, provided the attendance will be resumed immediately following such breaks. However, persons enrolled in correspondence courses where physical attendance is not regularly required shall not be considered students for the purposes of this exemption by virtue of such enrollment.

2223.3 Incapacitated

Recipients of Social Security Disability Benefits (OASDI) and recipients of MA-SSID shall be considered disabled for the purposes of this exemption.

- (2223.3) Other individuals claiming a disability exemption shall in the absence of physical evidence, furnish the names of medically qualified sources which can substantiate such disability or documentary evidence which supports the claim. Adequate documentation shall appear in the case file to support the granting of this exemption.

2223.4 Employed

If a person claims to be exempt by reason of employment for at least thirty hours per week, verification of the amount of income received from such employment, as is elsewhere required for certification, is sufficient to establish the exemption, provided the amount of income appears to be consistent with a conclusion of employment for thirty hours per week under the general conditions prevailing in the community.

However, if the individual does not meet this test, but still claims to be employed, then, in cooperation with the EW, the applicant shall be requested to supply documentary evidence of the existence of an employee-employer relationship and that the number of hours worked is equivalent to thirty hours a week.

Factors to be considered, while not all inclusive, are:

- (1) Does the wage meet State, local and Federal minimums.
- (2) Have deductions for required mandatory amounts for Federal and/or State income taxes, Social Security tax, etc., been made by employer.
- (3) Does the employer pay unemployment insurance premiums on behalf of the employee.

Persons engaged in hobbies or volunteer work or any other activity which cannot, because of the minimal amount of monies received from such activity, be considered as gainful employment, shall not be considered exempt from work registration regardless of the amount of time spent in such activity.

NOTE: Persons employed at least thirty hours per week in programs under the Domestic Volunteer Services Act of 1973 are exempt from the work registration requirement even if the compensation paid is only minimal. These programs include Foster Grandparents, Retired Senior Volunteer Programs, Service Corps. of Retired Executives, VISTA and other programs coordinated by ACTION.

2223.5 Self-employment

If a person claims to be exempt by reason of self-employment, verification of the amount of income received from self-employment is sufficient to establish the exemption, provided the amount of income appears to be consistent with a conclusion of full-time (30 hours a week) employment.

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If the income is not sufficient, but the client still claims to be self-employed, he must cooperate with the EW in establishing that the income received from the self-employment enterprise is at least sufficient to be considered gainful employment and that the volume of work claimed justifies a determination that the self-employment enterprise is a fulltime job for the purpose of this exemption. The household must cooperate in providing adequate documentation to substantiate the claim.

Persons engaged in hobbies or any other activity which cannot, because of the minimal amount of monies received from such activity, be considered as gainful employment, shall not be considered exempt from work registration regardless of the time spent in such activity.

2223.6 Addicts or Alcoholics

The regular participation of an addict or alcoholic in a drug or alcoholic treatment and rehabilitation program may be verified through the organization or institution operating such program prior to granting the exemption.

2223.7 Cooperation

In any case, where any question of the propriety of exemption from the work requirement arises, the head of the household and the household member must cooperate in furnishing evidence to support the contention of exemption from the requirement to register. Failure to cooperate in furnishing such evidence will result in the member being required to register, or failing such registration, the household shall be denied program benefits.

2224 ADDITIONAL REGISTRATION REQUIREMENTS

Each member required to register for employment will also be required to:

- (1) Report for an interview to the DES office where he is registered upon reasonable request.
- (2) Respond to a request from the DES office requiring supplemental information regarding employment status or availability for work.
- (3) Report to an employer to whom he has been referred by such office.

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beyond the member's control, such as, but not limited to illness, illness of another household member sufficiently serious to require the presence of the member, unavailability of transportation, and an unanticipated emergency.

2227

Redetermination of Eligibility

When a household has been determined ineligible for participation due to a refusal of a member to comply with the above requirements, eligibility may be reestablished (provided the household is otherwise eligible) upon the expiration of the 1 year suspension, upon the member's becoming exempt from the work requirements, or upon the member's compliance as follows:

- (1) Refusal to register--registration by the household member.
- (2) Refusal to report for interview to the DES office where he is registered--reporting for the required interview.
- (3) Refusal to respond to a request from the DES office requiring supplemental information regarding employment status or availability for work--response to the employment office correspondence.
- (4) Refusal to report to an employer to whom he has been referred by such office--reporting to such employer or another employer to whom he is referred.
- (5) Refusal to accept a bona fide offer of the suitable employment to which he was referred by such office--acceptance by the household member of such employment or of any other employment of at least 30 hours per week.
- (6) Refusal to continue suitable employment to which he was referred by such office--returning to such employment or acceptance of any other employment of at least 30 hours per week.

2228

Registrant Reporting Requirements

Although the ES office should notify the HW of placement actions, this does not relieve a household of its responsibility to report the acceptance of employment or receipt of income from employment from any source by any member of the household in accordance with the reporting requirements for change in household circumstances specified in 2403.

2229

STATE REPORTING

The Department shall report activities in connection with administration of the work registration requirement using Form FNS-285, Report of Reduction/Termination of Food Stamp Benefits, which is furnished to the Department by FNS. (See Page 51 for an example of Form FNS-285).

Entries to be made on the form are self-explanatory. Most of the required information is a compilation of the effects of certification actions taken as a result of receipt of information statements, which are forwarded in duplicate by the DES office, when there has been a referral, placement action, or refusal to comply by the registrant. Other information, such as number of registrations, reductions in benefits, or terminations for refusal to register, may be acquired at the time of certification action. The report must include those recipients who are registered for WIN unless exempted according to criteria in paragraph 2222.

The dollar figures in those columns reflecting reductions in amounts of or termination of benefits are intended to be the total reductions in the monthly free coupon entitlement which result from certification action, whether or not coupons were already purchased during the month in which the action was taken.

The WSO must complete FNS-285, forward it to the Regional Office which in turn must forward the report to the Central Office.

2230

UNLAWFUL STRIKES

In any case of a strike which has been determined unlawful by a court decision currently in force, all households, which contain one or more members involved in the strike and affected by the court order, shall be denied or terminated participation in the program. However, if the household can demonstrate that the member or members involved in the illegal strike are not required to register for work under the exemptions listed in 2222, the household may then be certified for participation, if otherwise eligible.

2263.7a Volunteer Reimbursements

Payments which are reimbursements for expenses incurred in performing volunteer services for non-household members shall not be counted as income in the Food Stamp Program. The payment must be incurred because of the performance of the volunteer services and must be in line with the actual expenses incurred by the volunteer.

2263.7b Representative Payments

Payments received on behalf of a third party (for example, a Social Security recipient) do not count as income to the representative payee's household, except when the beneficiary is a member of that household. The representative payee is legally liable to use the payment solely for the care and maintenance of the beneficiary.

2263.8 Youth Employment and Demonstration Project Act

Payments received from the Youth Incentive Entitlement Pilot Projects, the Youth Community Conservation and Improvement Projects and the Youth Employment and Training Programs shall not be counted as income in the Food Stamp Program. All other payments received under the CETA program including payments from the Young Adults Conservation Corp will continue to count as income to the food stamp household.

2263.9 WIC

Payments or benefits received under the WIC Program.

2263.10 Non-recurring Lump Sum Benefits

Non-recurring lump sum payments such as one-time payments from insurance settlements; sale of property except as related to self-employment in 2262.3; cash prizes, awards, or gifts other than those specified in 2262.11; inheritances; retroactive Social Security and Railroad Retirement pension payments; income tax refunds; and similar payments. Any of the above payments received in recurring rather than lump sum payments will count as income. Non-recurring lump sum payments will be treated as a resource under 2253.

2263.11 Recoupments For Prior Overpayments

Amounts withheld from income to pay a previous overpayment shall be excluded if the overpayment was or would have been counted as income at the time it was received. For example, recoupments from PA, SSI or Social Security would be excluded from income. Garnishments from wages would not be so excluded.

2264 Income Deductions

The following expenses will be the only deductions allowed to arrive at a household's adjusted monthly income. To be eligible for a deduction, the expense must be incurred by and paid for a household member, except where noted. For the purpose of determining allowable deductions, ineligible aliens who are an integral part of the household's economic unit shall be considered as any other household member. The household must pay the expense or anticipate payment during the certification period in which the deduction is claimed. The expense is still deductible even if payment is made from resources or non-excluded vendor payments.

2264.1 Work Allowance

Ten percent of income received as compensation for services performed as an employee or monies received as a training allowance not to exceed \$30 per month per household. The 10 percent shall be computed based on gross income from the following sources prior to any mandatory or other deductions:

- (1) Compensation for services as an employee (See 2262.1) or training allowances (See 2262.4).
- (2) Any income attributable to the furnishing of housing to a household by an employer (See 2262.2). Any vendor payments made on behalf of an employee by an employer or a trainee by the training program or sponsor.

The 10 percent deduction does not apply to the following income:

- (1) Monies previously listed as excluded shall not be used in calculating the amount of this deduction, including income excluded under 2263.1.
- (2) Income received as compensation from a self-employment enterprise.
- (3) Monies received as scholarships, deferred payment loans, or the expenses of education or from any other source or which are not included in the definition of training allowances (See 2262.4).

The ten percent deduction is intended to cover those expenses incidental to employment and/or training such as transportation, meals away from home, special clothing and other incidentals necessary for such employment or training.

2264.2 Mandatory Deductions

Mandatory deductions from earned income which are not elective at the option of the employee which are for local, State, or Federal income tax withholding payments, Social Security taxes, mandatory retirement payments, and mandatory union dues. The payment of union dues shall be considered mandatory even in those States with right to work laws. In addition, mandatory deductions may include amounts garnished from wages only to the extent that these amounts would be allowable deductions if paid separately under any of the following categories.

2264.3 Medical Expenses

The total costs for medical expenses, exclusive of special diets, when the cost exceeds \$10 per month per household. When the cost does exceed \$10 per month, the total cost for medical expenses shall be deducted. If the cost is only \$10 or less, no deduction will be allowed.

Medical costs include the payment for medical or dental services; hospitalization or nursing care, including costs specified in (1) below; prescribed drugs, including insulin or other over-the-counter medication when prescribed by a medical practitioner; health and hospitalization policy payments (excluding costs of health and accident or income maintenance policies); medicare

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payments; costs of prosthetics, including the costs of securing and maintaining a seeing eye dog as specified in (2) below; reasonable cost of transportation necessary to secure medical treatment or services; and the cost as determined in (3) below of an attendant, housekeeper, or child care services necessary due to age, infirmity, or illness.

- (1) Payments by the household for hospitalization or nursing care of an individual who was a household member immediately prior to entering a hospital or nursing home shall be deductible.
- (2) For households which incur the expense of a seeing eye dog, the cost of dog food and veterinarian bills and other maintenance costs may be included in the computation of the medical expense. If actual costs are not available, the State may use a standard deduction, approved by FNS, for the use and maintenance of a seeing eye dog. The former PA standard or a new standard developed by the State may be used.
- (3) The amount deducted for an attendant or housekeeper who is necessary for medical care reasons will be the amount actually paid to the attendant or housekeeper. In addition, for those households who furnish the attendant or housekeeper the majority of his meals, a deduction equal to the value of the one-person monthly coupon allotment will also be made.

Deductions for so-called "medicine chest" supplies, not covered above, may not be made. In addition, the amount to be deducted will be that amount actually paid during the certification period, even though part may be reimbursable through insurance.

Reimbursement payments will be treated as lump sum payments when received in accordance with 2253. The deduction ends when the reimbursement is received.

2264.4 Child Care

Payments for the care of a child or other persons when necessary for a household member to accept or continue employment or training or education which is preparatory for employment. The amount deducted for an attendant or housekeeper who is necessary for such care will be the amount actually paid to the attendant or housekeeper. In addition, for those households who furnish the attendant or housekeeper the majority of his meals, a deduction equal to the one-person monthly coupon allotment shall be made.

2264.5 Tuition and Mandatory Fees

Tuition and mandatory fees assessed by educational institutions regardless whether the household member is a student as defined in 2328. No deduction shall be allowed for any other educational expenses such as, but not limited to, the expense of books, school supplies, meals at school, and transportation. Moreover, no deduction shall be permitted for educational expenses of a person who is not a household member during the certification period in which the deduction is claimed. For additional instructions on determining eligibility of households with students see 2328.

2264.6 Support and Alimony Payments

Support and alimony payments which are court ordered. Such payments made voluntarily or in amounts which exceed the order of the court shall not be deducted except as specified in the court order.

2264.7 Unusual Expenses

Unusual expenses incurred due to an individual household's disaster or casualty losses which could not be reasonably anticipated by the household. A disaster loss can affect one or a number of households, although not so many as to necessitate a disaster declaration from FNS. In such situations, the damage is generally severe and households are forced to evacuate their homes. Occasionally, evacuation will also result from the threat of a natural disaster, and this too can result in unusual household expenses. A casualty loss on the other hand will rarely affect more than one household and generally the household will be able to remain in the home.

Unusual expenses resulting from a household's disaster or casualty losses will include:

- (1) The cost of replacing or repairing essential items of property damaged or destroyed through vandalism, theft, fire, flood, tropical storms, or by the elements.
- (2) The expense incurred in moving from an area evacuated due to the threat or onset of a natural disaster and the cost of protecting property left in an evacuated area.

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- (3) The cost of temporary shelter when a household is forced to leave its normal residence as a result of a natural disaster or casualty loss. Payments which such household continues to make on the normal residence will be included as part of the shelter costs and may be deductible under 2264.8.
- (4) In addition, an unusual expense will include funeral costs of individuals who were household members prior to death, including those who were household members prior to hospitalization or other care; and of any person for whom the household head would normally have financial responsibility. A deduction will be made for only those costs that appear reasonable, for instance, the expense of a wake would not be a reasonable costs.
- (5) The expense allowed in the above categories will be that paid or anticipated to be paid during the certification period in which claimed, even though part may be reimbursable. Reimbursement payments will be treated as a lump sum payment when received in accordance with 2253 and the deduction ends when the reimbursement is received. In addition, amounts paid in goods or money by a private or public charitable organization will not be deductible.

Unusual expenses will not be allowed for:

- (1A) The cost for repair or replacement of property, clothing, etc., which becomes necessary due to mechanical failure, wear and tear, obsolescence, or any other occurrence not directly connected to the individual household disaster.
- (2A) The cost for repair or replacement of any nonessential item, such as, but not limited to, a car or other vehicle.

- (3A) The cost of food destroyed or lost as a result of an individual disaster, except as provided below.

Household which incur unusual expenses because of a disaster or casualty loss are in no way exempt from normal certification requirements. They must complete the entire application and register for work as any other household. The EW shall not assume the total absence of income or resources for households suffering a disaster or casualty loss as in many instances the employment and resources of such households are not affected by the disaster. When an applicant household claims an unusual expense, the EW shall:

- (1B) Review the application to assure that all program requirements have been met and that the unusual expenses being claimed are allowable. If the household is temporarily sharing shelter with another household because of damage to their normal residence, each household will be treated as separate economic units even though they may not purchase and store food separately.
- (2B) Review household circumstances in terms of the emergency criteria provided in 2313 to determine if households qualifying as zero purchase after the normal income computation may be certified for 30 days without completing verification. However, the EW shall verify that the disaster or casualty loss did occur. The unusual and other expenses used in the income computation shall be only those expected to be paid during the 30-day period of certification. Households may estimate such expenses and if they appear reasonable, no verification is required.
- (3B) However, when the above households submit an application for certification subsequent to their 30-day certification or for any household where the income computation does not result in a zero purchase level, complete the normal verification requirements including the verification of unusual expenses which appear questionable.
- (4B) Obtain supervisory approval for all applications where an unusual expense has been allowed.

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In the event that food coupons or food purchased with such coupons are lost, stolen, or destroyed, the household may request a second allotment of coupons be authorized during the month in which the individual disaster occurred. In making a determination, the EW shall, after verification of such loss, determine whether the household will need additional food supplies prior to the household's next regularly scheduled issuance. The amount of coupons issued shall be that amount which will be required by the household for the period of time remaining until the household's next issuance date. In no event may less than a quarter monthly allotment be provided. An amount equal to the original purchase requirement shall be deducted to determine the income on which coupons will be issued. No deduction or second issuance may be made for a household after the next scheduled issuance date.

2264.8 Shelter Costs

Shelter costs in excess of 30 percent of the household income to be calculated after all other allowable deductions have been made.

Shelter costs will include only the following:

- (1) Payments made on the shelter occupied by the household, whether such payment is made as rent, mortgage, or other payment leading to the ownership of such shelter, including interest on such payments.
- (2) Bills incurred for heating, cooking fuel, electricity, water and sewer, garbage and trash collection fees and the basic service fee for one telephone (including tax on the basic fee), whenever such payments are made separately from shelter payments in (1) above.
- (3) Property taxes, State and local assessments, and insurance on the structure itself, but not separate costs for insuring furniture or personal belongings.
- (4) Any of the above costs when paid by vendor payments which were included as income.

Not to be included in shelter costs are:

- (1A) Fees charged for deposit on utilities including telephone, or damage or advance deposits on rental property.
- (2A) Repair or replacement of any appliance or any portion of the home due to wear and tear or mechanical problems.

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- (3A) Any costs related to housing not actually occupied by the household, except when such shelter has been temporarily abandoned by the household as a result of a natural disaster or casualty loss (see 2264.7).

- (4A) HUD housing subsidy payments.

Utility costs are among the costs allowed in computing the shelter deduction.

1. COMPUTATION OF UTILITY COSTS

Households which claim utility costs as part of their shelter deduction shall have their monthly utility allowance calculated in one of two ways. All households shall be informed about the respective advantages and disadvantages of the Standard Utility Allowance in contrast with use of actual utility costs.

- a.) Standard Utility Allowance: Households selecting this method must verify that they have heating costs not included with rent payments and state they do not share heating costs with another household. The Standard Utility Allowance includes heating, cooking fuel and electric costs only. Other utility costs, such as water bills or the telephone basic service fee, must be added to the amount from the table when applicable.
- b.) Cost of Utilities "As Billed": Households which have heating costs included in their rent or who state that they share heating costs with another household are required to use this method. Households which anticipate heating, cooking fuel or electric costs higher than the standard amount should select this method.

To determine a household's monthly utility allowance, the EW must make a reasonable prediction of the household's utility bills over the certification period. (S)He shall use the most recent month's bills and any other accurate information available to make a prediction of anticipated cost. This reasonable prediction must take into account seasonal differences and fuel cost variations. Prior months bills will be relied upon only as an indicator of anticipated bills and will not be averaged to compute the household's monthly utility allowance.

Note: "Budget Payment Plan" households are to be allowed the billing plan amount.

- c.) Add On: After the EW has calculated the household's anticipated monthly utility allowance in accordance with one of the above methods, certain other bills may be added to the monthly allowance if:

1. the bill was received prior to January 1, 1978, and
2. the household was not previously allowed a deduction for the bill or only part of the bill was allowed. (Only the undeducted amount can be credited as an "Add On"), and
3. the household paid the bill during the current certification period or intends to pay the bill during their current or newly assigned certification period. The household must have sufficient income and resources on hand to cover the intended payment of bills received before January 1, 1978.

The EW may average amounts paid, or intended to be paid, over the certification period to determine a monthly "add on" amount.

(2264.8) 2. CERTIFICATION PERIODS FOR HOUSEHOLDS WITH HIGH UTILITY COSTS

Households which expect their utility bills to be in excess of the standard amount and to fluctuate substantially during the certification period should be assigned a variable basis of issuance (See 2304), or a shorter certification period, or the household may elect to have the EW compute the average monthly cost of future, projected bills over the certification period. If the household chooses to have its bills averaged over the certification period, the EW must anticipate any increases in utility bills the household expects to receive during the certification period.

3. CHANGES WITHIN A CERTIFICATION PERIOD FOR HOUSEHOLDS WITH HIGH UTILITY COSTS

A certified household shall receive an adjustment in its utility allowance whenever its most recent month's bills exceed the amount that has been anticipated. When recalculating the household's monthly utility allowance, the EW shall explain both methods of computing utility costs and the "add on" provision to the recipient.

- a.) Switching: Household may switch from actual costs to a higher standard amount or from the standard amount to higher actual costs once during a certification period of two months or more. If actual costs are more than \$25 over the standard amount, the household will be entitled to over-the-counter procedures as described in b below. In addition, households may switch from actual costs to the Standard Utility Allowance whenever the standard amounts are updated.
- b.) Utility Cost Increases Over \$25: Adjustments must be made monthly whenever a household becomes entitled to a lower purchase requirement due to an increase of more than \$25 over the household's current utility allowance. If the household has not yet cashed its ATP or has cashed only the first half of its ATP, the EW will correct the household's basis of issuance and issue an over-the-counter ATP in the corrected amount within ten days or by the end of the allotment month, whichever is sooner (See Supplement IX). The following month's ATP must be issued in the new amount.

If the household has already cashed its entire ATP, no adjustment for that month can be made. However, the household's basis of issuance shall be corrected and the next month's ATP must be issued in the new amount.
- c.) Utility Cost Increases of \$25 or Less: All households reporting an increase of \$25 or less over the previous month's utility allowance will have the change processed in accordance with normal procedures (See 2404).

(2264.8) 4. CLAIM DETERMINATION PROCEDURES FOR HOUSEHOLDS WITH HIGH UTILITY COSTS

A household allowed a deduction for a utility cost that is never paid shall not be subject to claim determination proceedings for the over-issuance unless the household:

- a.) fails to report a change over \$25 or the EW fails to act on a reported change over \$25 (See 2403), or
- b.) deliberately misrepresents the facts by claiming a bill(s) on the application that is never incurred. For example, a household that produces a heating bill when utilities are included in the rent would be subject to claim determination procedures.

- (2264.8)
- (2A) Repair or replacement of any appliance or any portion of the home due to wear and tear or mechanical problems.
 - (3A) Any costs related to housing not actually occupied by the household, except when such shelter has been temporarily abandoned by the household as a result of a natural disaster or casualty loss (See 2264.7).
 - (4A) HUD housing subsidy payments.

Utility costs are among the costs allowed in calculating shelter expenses. Utility costs can be determined by:

- (1) Use of Standard Utility Allowances - for households who verify that they have heating costs not included with rent payments and who state they do not share heating expenses with another household. The Standard Utility Allowances include heating, cooking fuel, and electric expenses. The allowances are effective as of the first certification of a qualified household that occurs after issuance of the standard. The EW shall inform the household at time of certification about the respective advantages and disadvantages of the Standard Utility Allowances in contrast with use of actual utility costs. The household must decide at time of certification to use actual expenses or request use of standard.
- (2) Use of actual utility costs to derive anticipated expenses - is required for households whose heating expenses are included in their rent, who share heating costs with another household, or who request to use actual costs. The amount to be allowed is the amount anticipated to be paid during the certification period. The EW must verify actual expenses and make a reasonable prediction as to the amount anticipated to be paid. The EW must see paid or unpaid bills for previous months. The reasonable prediction must take into account the household's intention to pay the expense, seasonal differences, and fuel cost variations.
- (3) Switching from use of Standard Utility Allowances to actual costs during a certification period - may be allowed if the verified paid expenses average \$25 per month more than the standard deducted for the months gone by in the certification period. The EW must utilize the desk review procedures (See Paragraph 2404) to make the change for the remainder of the certification period. The change must be made for those households who qualify effective no later than the first issuance period that occurs ten days after the household has notified the Department of the increase in expenses.

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STANDARD UTILITY ALLOWANCES

FIRST MONTH OF CERT. PD.	NUMBER OF MONTHS IN CERTIFICATION PERIOD	- STANDARD UTILITY ALLOWANCE
JANUARY	1 month - \$240; 4 months - \$161; 7 months - \$106; 10 months - \$ 89 2 months- \$204; 5 months - \$139; 8 months - \$ 95; 11 months - \$ 94 3 months- \$187; 6 months - \$120; 9 months - \$ 88; 12 months - \$105	
FEBRUARY	1 month - \$167; 4 months - \$114; 7 months - \$ 75; 10 months - \$ 79 2 months- \$161; 5 months - \$ 96; 8 months - \$ 69; 11 months - \$ 92 3 months- \$134; 6 months - \$ 83; 9 months - \$ 72; 12 months - \$105	
MARCH	1 month - \$155; 4 months - \$ 78; 7 months - \$ 55; 10 months - \$ 85 2 months- \$118; 5 months - \$ 66; 8 months - \$ 60; 11 months - \$ 99 3 months- \$ 96; 6 months - \$ 59; 9 months - \$ 69; 12 months - \$105	
APRIL	1 month - \$ 81; 4 months - \$ 44; 7 months - \$ 46; 10 months - \$ 93 2 months- \$ 66; 5 months - \$ 40; 8 months - \$ 59; 11 months - \$100 3 months- \$ 52; 6 months - \$ 39; 9 months - \$ 77; 12 months - \$105	
MAY	1 month - \$ 51; 4 months - \$ 30; 7 months - \$ 56; 10 months - \$102 2 months- \$ 38; 5 months - \$ 30; 8 months - \$ 77; 11 months - \$107 3 months- \$ 32; 6 months - \$ 41; 9 months - \$ 95; 12 months - \$105	
JUNE	1 month - \$ 24; 4 months - \$ 25; 7 months - \$ 80; 10 months - \$112 2 months- \$ 23; 5 months - \$ 38; 8 months - \$100; 11 months - \$109 3 months- \$ 23; 6 months - \$ 56; 9 months - \$108; 12 months - \$105	
JULY	1 month - \$ 21; 4 months - \$ 42; 7 months - \$111; 10 months - \$118 2 months- \$ 22; 5 months - \$ 63; 8 months - \$100; 11 months - \$112 3 months- \$ 25; 6 months - \$ 90; 9 months - \$122; 12 months - \$105	
AUGUST	1 month - \$ 23; 4 months - \$ 73; 7 months - \$132; 10 months - \$121 2 months- \$ 27; 5 months - \$103; 8 months - \$135; 11 months - \$112 3 months- \$ 49; 6 months - \$126; 9 months - \$129; 12 months - \$105	
SEPTEMBER	1 month - \$ 31; 4 months - \$123; 7 months - \$151; 10 months - \$121 2 months- \$ 62; 5 months - \$147; 8 months - \$142; 11 months - \$112 3 months- \$ 90; 6 months - \$150; 9 months - \$132; 12 months - \$105	
OCTOBER	1 month - \$ 93; 4 months - \$176; 7 months - \$158; 10 months - \$120 2 months- \$120; 5 months - \$174; 8 months - \$145; 11 months - \$111 3 months- \$154; 6 months - \$171; 9 months - \$131; 12 months - \$105	
NOVEMBER	1 month - \$146; 4 months - \$194; 7 months - \$152; 10 months - \$113 2 months- \$185; 5 months - \$186; 8 months - \$136; 11 months - \$106 3 months- \$203; 6 months - \$169; 9 months - \$123; 12 months - \$105	
DECEMBER	1 month - \$223; 4 months - \$196; 7 months - \$134; 10 months - \$102 2 months- \$232; 5 months - \$173; 8 months - \$120; 11 months - \$101 3 months- \$210; 6 months - \$153; 9 months - \$109; 12 months - \$105	

PROCEDURE FOR TABLE USE:

1. Find the first month of the certification period in the first vertical column of months.
2. Read across until you find the figure for the number of months in the certification period.
3. The dollar figure next to the number of months will be the standard utility allowance.
4. The standard utility allowance for the certification period represents the monthly amount to be deducted for heating, cooking fuel, and electric expenses.
5. Add this allowance to other shelter expenses to derive total shelter expenses.

(2264.8) The simplified table below must be used to determine excess shelter costs, if any. Locate the correct income bracket on the table. The income figure to be used will be income minus all other allowable deductions. The shelter standard for this income bracket represents the 30 percent figure. If the household's total shelter costs exceed the shelter standard, subtract the shelter standard from shelter costs to determine excess shelter costs.

<u>MONTHLY</u> <u>INCOME</u>	<u>SHELTER</u> <u>STANDARD</u>	<u>MONTHLY</u> <u>INCOME</u>	<u>SHELTER</u> <u>STANDARD</u>	<u>MONTHLY</u> <u>INCOME</u>	<u>SHELTER</u> <u>STANDARD</u>
\$ 0 - \$ 29.99	\$ 0	\$380 - \$389.99	\$114	\$740 - \$749.99	\$222
30 - 39.99	9	390 - 399.99	117	750 - 759.99	225
40 - 49.99	12	400 - 409.99	120	760 - 769.99	228
50 - 59.99	15	410 - 419.99	123	770 - 779.99	231
60 - 69.99	18	420 - 429.99	126	780 - 789.99	234
70 - 79.99	21	430 - 439.99	129	790 - 799.99	237
80 - 89.99	24	440 - 449.99	132	800 - 809.99	240
90 - 99.99	27	450 - 459.99	135	810 - 819.99	243
100 - 109.99	30	460 - 469.99	138	820 - 829.99	246
110 - 119.99	33	470 - 479.99	141	830 - 839.99	249
120 - 129.99	36	480 - 489.99	144	840 - 849.99	252
130 - 139.99	39	490 - 499.99	147	850 - 859.99	255
140 - 149.99	42	500 - 509.99	150	860 - 869.99	258
150 - 159.99	45	510 - 519.99	153	870 - 879.99	261
160 - 169.99	48	520 - 529.99	156	880 - 889.99	264
170 - 179.99	51	530 - 539.99	159	890 - 899.99	267
180 - 189.99	54	540 - 549.99	162	900 - 909.99	270
190 - 199.99	57	550 - 559.99	165	910 - 919.99	273
200 - 209.99	60	560 - 569.99	168	920 - 929.99	276
210 - 219.99	63	570 - 579.99	171	930 - 939.99	279
220 - 229.99	66	580 - 589.99	174	940 - 949.99	282
230 - 239.99	69	590 - 599.99	177	950 - 959.99	285
240 - 249.99	72	600 - 609.99	180	960 - 969.99	288
250 - 259.99	75	610 - 619.99	183	970 - 979.99	291
260 - 269.99	78	620 - 629.99	186	980 - 989.99	294
270 - 279.99	81	630 - 639.99	189	990 - 999.99	297
280 - 289.99	84	640 - 649.99	192	1000 - 1009.99	300
290 - 299.99	87	650 - 659.99	195	1010 - 1019.99	303
300 - 309.99	90	660 - 669.99	198	1020 - 1029.99	306
310 - 319.99	93	670 - 679.99	201	1030 - 1039.99	309
320 - 329.99	96	680 - 689.99	204	1040 - 1049.99	312
330 - 339.99	99	690 - 699.99	207	1050 - 1059.99	315
340 - 349.99	102	700 - 709.99	210	1060 - 1069.99	318
350 - 359.99	105	710 - 719.99	213	1070 - 1079.99	321
360 - 369.99	108	720 - 729.99	216		
370 - 379.99	111	730 - 739.99	219		

- c. Disaster or Casualty Loss - See Handbook. Verification that the disaster or casualty loss did occur is required by policy report, agency report, fire department report, or insurance company report. (Amount deducted for loss - Refer to Section C, No. 7 of this Supplement).
- d. Rent/Mortgage - Verification which establishes monthly amount due is sufficient; i.e., mortgage bill, statement, or receipt; rent bill, or receipt, cancelled check, money order, written statement from landlord with monthly amount due, or lease.
- e. Real Estate Taxes - One most recent tax bill, receipt, cancelled check, money order, or verbal statement from tax assessment office. Prorate expenses over number of months the bill is intended to cover.
- f. Medical Care - (Including doctor, dental, hospital, prescribed medicine, health insurance, Medex, live-in-attendant, nursing and essential care) shall be always verified when the amount exceeds \$40 per month or \$480 per year per household or the amount is extremely questionable. Medical expenses paid during the 30 days prior to date of application shall determine the amount to be allowed monthly for the length of the certification period.

Verification Method- bills, receipts, cancelled checks, money orders, check book stubs, or written statement from doctor, dentist, druggist, etc. Verification is not required if amount claimed is \$40 or less per month unless EW finds information submitted to be extremely questionable. If verification is subsequently provided during the certification period, a change in the deduction allowed for medical costs can be made by utilizing the Desk Review (2402) procedures.

- g. Utility costs (heating, cooking fuel and electric expenses) - See 2264.8

2300 ELIGIBILITY DETERMINATIONS

2301 Determining Adjusted Net Monthly Food Stamp Income

The determination of NA eligibility and the basis of issuance for all households is based on the adjusted net monthly food stamp income and household size. The income and expenses reported by the applicant will not necessarily be in terms of monthly amounts and it will be up to the EW to convert these sums prior to a determination. In addition, all incomes are subject to varying degrees of fluctuations. To the extent possible, these fluctuations should be resolved to permit the longest certification period permissible. The following techniques are generally available to the EW in determining the household's adjusted monthly income. For application of these principles to specific household situations, see 2320.

2302 Income and Deduction Factors

The income and expense figures used to determine adjusted monthly income are those anticipated during the certification period. Past amounts are useful as indicators of what may be anticipated in the future, but any changes expected during the certification period must be accounted for in determining adjusted monthly income. For instance, a one-time payment made prior to certification would not be allowed as a deduction during the certification period. However, prior payments made by the household, if likely to continue into the future, may be used to establish the amount to be deducted during the certification period.

2303 Averaging

The most common means of converting income and expenses to monthly amounts is by averaging. Income received or expenses paid more often than once a month should be converted to a monthly figure by use of a multiplier in the following manner:

- (1) Weekly Income - The Department uses the multiple $4 \frac{1}{3}$ when converting weekly amounts to monthly amounts in computations of cost or income. If a decimal figure is to be used for these computations, that figure is 4.333.
- (2) Biweekly Income - The Department uses the multiple $2 \frac{1}{6}$ when converting biweekly amounts to monthly amounts in computations of cost or income. If a decimal figure is to be used for these computations, that figure is 2.167.
- (3) Twice Monthly Income - Multiply by 2.

(2303)

Income received or expenses paid less often than once a month may be averaged over the certification period. For instance, interest or dividends credited quarterly would be averaged over the certification period. Likewise, if an annual expense such as payment of a household's property taxes occurs within the certification period, it would be averaged by the number of months in that period. Alternatively, such income and expenses may be handled under provisions in 2304.

Income and expenses which are reported as monthly amounts, or have been converted to such, can still vary within the certification period. In such cases, the EW may continue to average to arrive at one basis of issuance for the entire certification period or use the method in 2304. In making this determination, the EW should consider whether the fluctuation is such that a single purchase requirement based on the average would make it difficult or impossible for the household to purchase coupons during the months when usable income is at its lowest level. In such cases, a variable basis of issuance may be appropriate or the household may be assigned certification periods to cover only the periods of stability.

2304

VARIABLE BASIS OF ISSUANCE

The EW may use the household's actual income and expenses in lieu of averaging even though these amounts will vary from month to month to determine eligibility and basis of issuance. For instance, if it is known in which month a particular expense will occur, such as payment of a medical expense, that amount may be deducted in its entirety during the month paid rather than averaged over the length of the certification period. The result will be a varying basis of issuance over the period of eligibility reflecting the household's fluctuating cash flow. This method is particularly appropriate in those instances where averaging would require the recipient to pay the same purchase price every month even though he had large expenses for one or more months which would limit his purchasing ability.

2310

CERTIFICATION PERIODS

The assignment of a certification period to an applicant household is based on the probability of changes in the status of the household. The EW should use the following guidelines in establishing the period of eligibility.

(2310)

The prescribed periods allowable represent only maximum time periods. The EW should exercise flexibility and assure that the assigned period represents, with consideration of the maximum periods, the time frame best suited to the individual household. A household need not be assigned the same certification period at each new certification, but rather assigned a new period of time based on a new review of the circumstances and needs of the individual household.

Eligibility for program benefits will cease at the end of each assigned certification period. Therefore, each household shall be notified of the expiration date of such period in accordance with 2351 so that the household may, if it so desires, make timely application for a new certification in order to prevent a loss of benefits.

2311

PA Households

In accordance with DHEW instructions, PA households are subject to a review of their continuing eligibility for PA benefits on a periodic schedule.

It is required that all PA households be certified for program benefits until their actual PA review date. The EW may assign a definite certification period to PA households; however, such a practice might result in the termination of food stamp benefits for PA households whose review of PA eligibility is not accomplished as scheduled. In other instances, households terminated from PA might continue to receive food stamp benefits by virtue of a certification period which, after termination of PA eligibility, has no further validity, and the household may, therefore, receive benefits to which it is not entitled.

The EW must make a review of food stamp eligibility at the same time the review of continuing PA benefits is made. Households whose PA benefits are to be reduced or terminated shall also be notified that food stamp benefits will also be terminated or reduced, if applicable. However, all households notified of termination of benefits must be further notified that they may make application for food stamp benefits as a NA household.

2312

NA Households

NA households shall be certified for periods of time based on the stability of income, household composition, and other factors which may affect eligibility. In addition, anticipated changes should be considered in establishing when a new certification is necessary.

(2312)

The following are maximum periods for NA household certification. The EW may assign lesser periods of time when a review of the individual household circumstances indicates that the household would be better served by assignment of a lesser period, or when assigning a lesser period would promote maximum effectiveness and efficiency of program operations. In addition, the EW may shorten the assigned certification period if a change in household circumstances so warrants (See 2402).

2312.1 Normal Certification Periods

The normal certification period for NA households shall be 3 months, except as follows or when the EW determines that a period less than the maximums set below would better suit a household's individual circumstances.

2312.2 Unstable Households

Households may be assigned a lesser period than 3 months when there is a possibility of frequent changes in income and household status; for example, day laborers and migrant workers during the work season whose income is uncertain and subject to extreme fluctuations due to availability of employment, weather, and other circumstances.

2312.3 Strikers

Households containing one or more persons subject to a lockout or on strike from their source of employment shall be certified for periods not in excess of 1 month.

2312.4 Reserved

2312.5 Stable Households

Households may be certified for periods of up to 6 months if there is little likelihood of changes in income or household status. These households would normally have a stable work and income record and would not anticipate changes which would affect income, including the possibility of large expenses incurred for medical or other allowable deductible items.

2312.6 Unemployable Households

Households consisting of unemployable persons with very stable income may be assigned certification periods of up to 12 months, providing other household circumstances are expected to remain stable. Such households would consist of those whose total income is received from Social Security or railroad retirement benefits, or payments from pension or disability funds.

2312.7 Self-Employed Households

Households whose primary source of income is from self-employment (including self-employed farmers), or regular farm employment with the same employer, may be certified for up to 12 months, provided that income can be readily predicted and household circumstances are not likely to change. This determination as it relates to farm employment is made in light of the ability of the worker who is regularly employed by the same employer (as opposed to a worker who has a number of employers during a period of time) to control the amount of money available to the household jointly with the employer through prior arrangements, sometimes known as "furnish".

In applying this principle, the EW should exercise caution in the assignment of the maximum allowable period if a review of household fluctuations in income over the year indicates that the household would be better served by assignment of a shorter certification period.

2313

Certification Pending Verification

All households whose income, either prior to or after adjustment, places them at the zero purchase level (See 2332), and who are determined to be in need of immediate food assistance, may be certified for program benefits pending verification provided that:

- (1) The results of the interview indicate that the household will probably be eligible when full verification has been completed; and
- (2) One collateral contact, at a minimum, has been made to obtain additional information which will confirm the statements of the applicant. The collateral contact must be made prior to certifying the household as eligible and the results of the contact entered in the case file. The documentation shall consist of, at least, the name and address of the person or organization contacted; the name of person supplying the name of the collateral contact, and a summary of the information obtained during the contact. The EW may make more than one collateral contact if necessary, to confirm the statements made on the application.

The certification pending verification shall not exceed 1 month and there shall be no further issuance to households certified in this manner until full verification is obtained which will confirm the certification action.

The EW shall not certify any household under this procedure more than once during a 6-month period, commencing with the initial issuance under this procedure.

Further, households certified under this procedure are not in any way exempt from any eligibility requirement, including, but not limited to work registration for all employable members of the household who are not otherwise exempt by 2222.

2320

ELIGIBILITY DETERMINATIONS FOR SPECIFIC HOUSEHOLDS

The following paragraphs explain the application of food stamp criteria and certification procedures to the eligibility determinations for specific households. In some instances the following examples will note a deviation from the general

2313 CERTIFICATION PENDING VERIFICATION

Households may be certified for one month pending full verification of eligibility only when the applicant:

- a.) reports an income so low, either before or after adjustment, that the household is eligible for stamps with no purchase requirement, and
- b.) has little or no liquid resources to draw on between application and the receipt of an ATP through normal channels, and
- c.) the household appears eligible on the basis of all other information furnished by the applicant.

The EW will rely on his or her knowledge of the program, the information on the application and the results of the face to face interview to determine if the household meets the requirements of a, b and c above. Collateral contact(s) shall not be made to confirm the statements of the applicant prior to granting certification pending verification.

The period of certification, pending verification shall not exceed one month. The verifications lacking at the time of certification must be obtained subsequent to each such certification. If they are not obtained, no additional certification pending verification may be granted. If they are obtained, there is no limit to the number of times a household may be certified pending verification.

Certification pending verification does not in any way exempt the household from any other eligibility requirement, including, but not limited to work registration for all employable members of the household who are not otherwise exempt. Certification under this procedure shall not be granted if the information provided by the applicant is unclear, inconsistent or contradictory (see 2011).

2320 ELIGIBILITY DETERMINATIONS FOR SPECIFIC HOUSEHOLDS

The following paragraphs explain the application of food stamp criteria and certification procedures to the eligibility determinations for specific households. In some instances the following examples will note a deviation from the general

(2320) certification procedures. Such exceptions concern households whose receipt of income or other household circumstances are substantially different from the typical food stamp household. The procedural deviations attempt to "normalize" these household situations in order to minimize any undue advantage or disadvantage to the household solely as a result of their unusual circumstances. The primary exceptions provided in the following examples are:

- (1) Annualizing the income for certain self-employed (See 2324) and school employees (See 2327) instead of considering only that income expected to be received during the period of certification. Likewise, certain student income is averaged over the period it is intended to cover (See 2328).
- (2) Allowing the self-employed and students deductions for certain expenses paid prior to the certification period instead of only those paid during the period of certification.
- (3) Requiring residents of drug or alcoholic treatment and rehabilitation centers (See 2330) to apply for and use food stamps through an authorized representative.
- (4) Requiring zero purchase households (See 2332) to provide additional verification of eligibility factors in order to adequately document their unusual circumstances, but also allowing eligibility for immediate assistance pending this verification.
- (5) Certifying households even though they include certain ineligible individuals. The income and resources of these households are handled differently depending on whether the ineligible individual is an alien (See 2331) or an SSI recipient (See 2323).

2321 Earned Income

In cases where the head of the household is steadily employed, income from previous months is usually a good indicator of the amount of income that can be anticipated in the month of application and subsequent months. If information supplied by the household or a collateral contact indicates that future

(2321)

income will differ substantially from the previous month's income, the EW will use such information to make a reasonable estimate of anticipated income. The method used to determine income will be fully documented in the case file.

When income is received on an hourly wage or piece work basis, weekly income may fluctuate if the wage earner works less than 8 hours some days or is required to work overtime on others. In this case the EW should consult with the household to determine the "normal" amount of income to be expected as a result of 1-week's work. This amount should be used to determine monthly income.

2322

PA Recipients

All income received by PA households, including a federally-aided public assistance grant, a general relief grant, any special allowances, and any other income, will be counted in determining adjusted net monthly food stamp income for basis of issuance purposes. Exemptions from income allowed under State PA plans for purposes of grant computation will not be allowed in determining income for food stamp purposes. PA households will receive only the income exclusions and deductions provided in 2263 and 2264.

Special allowances, including one-time special allowances, shall be included as income unless they are otherwise excludable under 2263.3 as irregularly received income. If special allowances are included as income, such amounts may be averaged or the household provided a varying purchase requirement or short certification periods to cover the period when the allowance is received as provided in 2303 and 2304. The same practice may be followed when the PA check is delayed beyond the first month of eligibility as is sometimes the case for households whose PA eligibility has recently been established. If income is averaged over the certification period, the EW should determine if the household has enough cash on hand to meet the purchase requirement. If averaging income will preclude household participation or will otherwise adversely affect household finances, a variable basis of issuance should be used or a certification period assigned which will allow for a recomputation of purchase price to reflect the actual income situation.

In the case of NA households which contain PA recipients, the above method shall be used to compute PA income which shall then be added to the income of all other members in determining eligibility and coupon basis of issuance.

2323 SSI RECIPIENTS

On January 1, 1974, the SSI program for the aged, blind, and disabled replaced the former federally aided public assistance categories of OAA, and APTD in the 50 States and the District of Columbia. Due to the specific provisions of law, SSI recipients require special handling for food stamp purposes.

2323.1 Definitions

For purposes of 2323, the following definitions will apply:

- (1) "SSI" means supplemental security income payments made under Title XVI of the Social Security Act, State supplemental payments (SSP) made under Section 1616 of that Act or payments made under Section 212 (a) of P.L. 93-66.
- (2) "SSI recipient" means an individual or an individual and his eligible spouse who receives SSI.
- (3) "Essential person" means an individual who is considered an essential person under the terms of P.L. 93-66.

2323.2 Eligibility

Under the provisions of P.L. 93-66, SSI recipients who receive, as part of their benefit, the cash value of the food stamp bonus are ineligible to receive food stamps. In cash-out States, the State agency shall terminate without advance notice any food stamp recipient who applies for and is determined eligible for SSI. Nonreceipt of SSI payments does not restore food stamp eligibility. The State agency shall not require persons potentially eligible for SSI to make application for SSI benefits as a condition of food stamp eligibility. (See paragraph 2200.2)

(2323.2)

In all other States and for disabled SSI recipients in Nevada, SSI recipients may apply for and participate in the Food Stamp Program as NA households; except that SSI recipients forming the following households shall be eligible for program benefits without regard to income and resource limitations:

- (1) An SSI recipient living as a one-person household;
- (2) A household consisting solely of SSI recipients and essential persons; or
- (3) A household consisting solely of SSI and PA recipients.

2323.3

Treatment of SSI Recipients in Cash-Out States

In the cash-out States, SSI recipients cannot be considered household members. The income and resources of SSI recipients cannot be considered available to eligible household members, nor may payments made by an SSI recipient on behalf of eligible household members be counted as income to the household. However, there are situations where the SSI recipient receives payments which are specifically meant for meeting the needs of eligible household members. Such payments might include but are not limited to AFDC grants for dependent children, foster care payments, support payments, and payments from trust funds and endowments. When the SSI recipient is functioning solely in a caretaker or disbursement capacity, the payment must be considered income to the household members it is intended to benefit.

The EW must exercise care in determining the amount of deductions for households with an ineligible SSI recipient. Payments made by the SSI recipient on behalf of the household for deductible household expenses cannot be allowed as a deduction to the eligible household members. On the other hand, when deductible expenses are met from funds for which the SSI recipient acts strictly in a disbursement capacity, the household is entitled to such deduction.

When eligible household members share deductible household expenses with an SSI recipient, the household is entitled only to a deduction based on that portion of the expense that is actually borne by the household. If the deductible expense is paid from funds that are pooled by the household members and the SSI recipient, it might be difficult to ascertain the source from which the payment is made. In this event the EW should make a reasonable division based on discussion with the household.

particularly difficult unless a pattern has been established over a certain period of time. When a three month certification period is assigned to such households, the EW should not average income over the certification period if it would prohibit participation due to substantial fluctuations in the flow of income.

2326 MIGRANT FARM LABORERS

Seasonal migrant farm laborers are individuals who move from one region or locale to another to engage in or seek farm, land or crop cultivation activities which are seasonal. Migrant farm laborers travel completely within a state or may move across many states, traveling in a seasonal pattern. Destitute migrant households, including, but not limited to, those who are newly arrived in an area, require immediate processing of their applications and may be entitled to have certain income disregarded.

2326.1 Application Processing

Migrant households are often in need of immediate food assistance because the availability of work may be uncertain and income may fluctuate substantially. The EW shall assist the migrant household by determining which of the procedures below best suits the need for immediate certification and issuance.

A.) Certification using Form FNS-286 - Certification of Household Transfer

Newly arrived migrant households which present an FNS-286 may have benefits continued in accordance with paragraph 2420. However, many households do not know to ask for this form or may not be able to participate using the FNS-286 because the certification being continued requires a purchase requirement. Migrant households which present an FNS-286 and are eligible for continued benefits at zero purchase level shall be issued an over-the-counter ATP.

B.) Certification Pending Verification

If the household does not have form FNS-286 or has one and does not wish to use it, the EW shall determine if the household qualifies for certification pending verification in accordance with paragraph 2313. When certifying migrant households under this provision, all income received or anticipated to be received in the certification period must be considered. If the household meets the criteria of 2313, it shall be certified for one month pending verification and issued an over-the-counter ATP.

C.) Special Certification Procedures for Destitute Migrant Households

If the household does not qualify for certification pending verification because all income received or anticipated to be received during the month of application less allowable deductions puts the household over zero purchase level, the EW shall use the following criteria to determine if the household is a destitute migrant household.

- (1) The household contains migrants, even if some household members are not migrants.
- (2) The household is destitute of both income and resources. A household is destitute of income when its recurring income, as defined in 2326.2 less allowable deductions, results in a zero purchase requirement. A household is destitute of resources when it does not have sufficient liquid resources to meet the household's monthly food needs (as determined by the Food Stamp coupon allotment) and total resources, liquid and non-liquid, do not exceed the amount allowable under 2251.

When certifying a household under this destitute procedure, the EW shall immediately make a collateral contact with a knowledgeable third party to confirm the household's circumstances unless the migrant household furnishes verification that would have been obtained through a collateral contact. Third party confirmation of any household circumstance shall be considered sufficient verification. Certification shall not be delayed when a collateral contact made to verify non-recurring income cannot be completed. After the collateral contact is made or the verification is accepted, the EW shall immediately certify eligible migrant households for a whole month or half month in accordance with 2326.5 and issue a whole or half month zero purchase ATP over-the-counter.

2326.2 Determining Income

To determine the income of migrant households, the EW shall consider all income which the household has received or expects to receive in the certification period. When evaluating migrant income to determine if the migrant household meets the destitute criteria contained in 2326.1, the EW shall count only that income which is determined to be recurring in the certification period.

A.) Recurring Income is counted when determining if the migrant household meets the destitute criteria. Income is considered recurring only if all three of the following factors are present.

- (1) The household must have received payments from the same income source previously: for example, Social Security benefits, AFDC or payments from a regular employer; and
- (2) payments must be received at regular intervals: for example, daily, weekly or monthly; and
- (3) the date of receipt and the amount of payment can be reasonably anticipated.

B.) Non-Recurring Income is not counted when determining if the migrant household meets the destitute criteria. Any income which does not meet the three criteria described in A shall be considered non-recurring income. Non-recurring income includes:

- (1) Income which the household has received from a new source between the start of the certification period and the date of application. The EW shall examine income from the new source to determine if future payments from that source will be considered countable recurring income.

- (2) Income which the household anticipates receiving from a new source between the date of application and the end of the certification period.
 - (3) Income which the household has received only at infrequent intervals in the past.
- C.) Income Unique to Migrant Households - Migrant workers may be paid in ways that are unique to the agricultural industry and the EW must determine if this income meets the recurring criteria described in A or whether certain forms of payment should be considered income at all. These payments include:
- (1) Lines of Credit - Workers paid at the end of the work season often receive credit at local stores. Credit purchases shall not be counted as food stamp income.
 - (2) Deferred Income - The EW shall not count as earned income wages which are customarily and routinely withheld by the grower until the end of the work season. This exemption does not apply to situations where households knowingly conspire with employers to eliminate or reduce the amount of countable income or change the cycle of payment when employers would normally have made payments to the migrant household on a more frequent basis.
 - (3) Travel Advances - Migrant workers sometimes receive advance payments to travel to work areas. The EW shall not count the travel advance (payment) as income to the migrant household when determining eligibility. Future payments shall be counted as recurring income if the advance was paid to the household prior to application and the household expects to be working during the certification period for the same individual or organization that provided the travel advance and the household expects one or more payments during the certification period and can reasonably anticipate the amount of such payment.

2326.3 Verification of Migrant Income

When documentary verification is not available for the earnings of migrant households, verification of earnings may be obtained through contact with individual growers and crew chiefs. Where growers and crew chiefs are not accessible or are not cooperative, the EW shall seek verification from other sources. These sources include, but are not limited to, migrant service organizations, DES, Farm Labor Bureau, Rural Manpower Development, Economics, Statistics and Cooperatives Service, growers associations and the county agent. If the applicant states s/he will be working for various growers and crew chiefs, a calendar form providing space for recording each days income and hours worked, together with a space for the signature of the grower or the crew chief to validate such information, may be provided the household for presentation at the next certification.

2326.4 Verification of Migrant Resources

Special care should be taken in dealing with migrants to determine if there are out-of-state resources or income from real property in the home-base area. For example, a migrant who claims Texas as a home-base area and who is applying for

food stamps in Michigan should be questioned as to the availability of resources in Texas as well as Michigan.

Particular attention should be paid to real property in the home base area. Each applicant household is permitted one home and lot as an exemption from resources. If the applicant has a home and lot in Texas and does not own a residence in Michigan, the Texas home will be exempted as a resource. Shelter adjustments, however, may only be calculated by using the costs of the currently occupied residence. A payment made for shelter in another project area cannot be taken into consideration when computing the shelter deduction.

Additionally, the EW should explore the possibility that out-of-state real property is being rented or is producing income in some way. If such property is producing income, such income must be added to all other household income in determining eligibility and basis of issuance.

2326.5 Certification Periods

The EW shall assign certification periods to destitute migrant households as follows:

- (1) Half month - if the date of application is between the 1st and 15th of the month and income will be received between the date of application and the 15th, or the date of application is after the 15th of the month.
- (2) Whole month - if the date of application is between the 1st and the fifteenth of the month and income will be received after the fifteenth of the month.

The EW shall certify all other migrant households for one month based on the countable income for that month. Migrants may not be certified for longer than one month unless they have documentary proof of a contract with a specific grower or crew chief with length of employment and the wages to be paid specified or the household is being certified during a non-work period. Migrant households determined eligible at zero purchase level shall be certified immediately and issued an over-the-counter ATP.

A migrant household may be certified under these procedures an indefinite number of times. However, when migrant households no longer qualify under the destitute criteria, the EW will use normal certification procedures to determine the migrant household's eligibility and basis of issuance.

2326.6 Work Registration of Migrants

Employable members of migrant households who are not employed at least 30 hours a week must register for and accept suitable employment in the same manner as other persons. Growers should be made aware of the fact that migrants are being registered with DES and that they can obtain workers there.

2326.7 Exempt Income of Migrant Children

Some problems have been encountered in determining the income of migrant children under 18 years of age when the household receives one payment in compensation for work performed by all household members. Since the earned income of a student under 18 years of age is exempt, the income must be differentiated from the rest of the household's income. Unless income can be identified as being earned specifically by the student, the EW shall prorate equally the income among the number of household members working and exclude that portion allotted to the student. This provision applies to students who are currently attending school and those who plan to return to school after academic breaks.

2327 SCHOOL EMPLOYEES

Households with members who receive income of other than an hourly piece-work basis from employment under a contract which is renewable on an annual basis will have such income averaged over a 12-month period to determine household eligibility. Such members will be considered to be receiving compensation for an entire year even though predetermined nonwork periods are involved or actual compensation is scheduled for payment during work periods only. The provisions of this paragraph are intended to apply primarily to teachers and other school employees.

2327.1 Contract Renewal

The renewal process may involve a signing of a new contract each year; be automatically renewable; or, as in cases of school tenure, rehire rights may be implied and thus preclude the use of a written contract altogether.

6. The fiscal clerk will batch the TD and forward it to RDCU no later than the next working day. The "change" TD must be held by the fiscal clerk until after the first of the next month ATP issuance.
7. The WSO will provide the emergency household with an Identification Card (FSP-3). The household shall be presented with the option of picking up the ATP from the issuance office, courier service to the local office from the issuance office when available and useful, or having the ATP placed in that day's mail by the issuance office.
8. The issuance office will establish a time cut off, not before three P.M., for these procedures to allow completion of the ATP document.
9. If courier service is not used, the issuance office designee will insure that the ATP will be placed in the mail if the emergency household or its representative does not pick up the ATP prior to the latest available mail pick up time in the particular community.

III. MIGRANT FARM LABORER HOUSEHOLDS

The intent of those procedures is to provide immediate food assistance to migrant households at zero purchase level by issuing the ATP over-the-counter. There is no limit to the number of times a migrant household may be certified under these procedures. However, the household must provide full verification after each certification made pending verification.

Migrant households certified as "destitute" under the criteria contained in 2326.1 may be assigned a half month or a whole month certification period.

A. Half Month Certification Period

1. Date of application is between the 1st and the 15th of the month and recurring income will be received between the date of application and the 15th of the month.
2. Date of application is after the fifteenth of the month.

NOTE: For those households certified destitute in the first half month an over-the-counter ATP is currently the only way the Department can issue the second half month's benefit even if the household is no longer destitute.

B. Whole Month Certification Period - The date of application is between the 1st and 15th of the month and recurring income will be received after the 15th of the month.

All other procedures in either I-B above (NPA) or II-B (PA) will apply to migrants.

orderly and timely as possible, consideration should be given to an appointment system on a temporary basis in the affected area. For example, if there is a large influx of strikers, the EW may advise the applicants that only a certain number can be interviewed during 1 day and the rest should make an appointment and return later. Group briefing sessions may also be helpful in screening patently ineligible households. In any event, application forms must be supplied when requested, be accepted when they are presented, and must be processed within 30 days after receipt.

2329.2 Resources and Verification

Particular emphasis should be placed on determining assets available to the household because of the strikers' recent long-term regular employment. In particular, the possible existence of extra cars or recreational equipment such as boats or campers should be explored. ~~Since a striker is considered to be unemployed during a strike, work-related exemptions such as a second car for that person cannot be allowed.~~ In most cases, verification of resources will be indicated.

2329.3 Income and Verification

The EW should be alert to the necessity of documenting and verifying the income of all household members from all sources. All income expected to be received during the certification period, including pay expected to be received by the striker and union benefit payments, must be considered. Union benefits or picket duty pay will not entitle the household to the 10 percent deduction for work related expenses (See 2264.1) as this is not considered earned income.

2329.4 Work Registration

Strikers must register for employment prior to certification and must accept suitable employment and comply fully with all work registration requirements (See 2224). Employment offered at a site subject to a strike or a lockout is not considered suitable, and acceptance of such employment by a striker, if offered, is not required, except under the conditions below.

2329.5 Unlawful Strikes

When a court of law has issued an injunction or other order declaring the strike to be unlawful, such an order shall be

(2329.5)

considered to be a continuing offer of suitable employment to the striker. Failure of the striker to return to his employment shall be considered failure to comply with the work registration requirement of the Food Stamp Act, and State agencies shall deny or terminate any household in which one or more household members are participating in a strike contrary to such a court order. However, if the household can demonstrate that the member or members involved in the illegal strike are not required to register for work under the exemptions in 2222, the household may then be certified for participation, if otherwise eligible.

2329.6

Certification Periods

Household with one or more members on strike are to be assigned certification periods of no more than 1 month.

2330

Narcotics Addicts and Alcoholics

Participants in drug addiction or alcoholic treatment and rehabilitation programs who elect to participate in the Food Stamp Program must meet the same income and resource standards as other NA households; however, special allowances are made in the requirements for cooking facilities for residents of treatment centers and work registration. In addition, residents of such centers must apply for, purchase, and use food stamps through the center as an authorized representative.

2330.1

Approval of Centers

The drug addict or alcoholic treatment and rehabilitation center must be approved by the agency or department of the State government which approves such program pursuant to P. L. 91-616, "Comprehensive Alcohol Abuse and Alcoholism Prevention Treatment and Rehabilitation Act of 1970" and P. L. 92-255, "Drug Abuse Office and Treatment Act of 1972." Such agency or department will certify that the center is a private nonprofit institution providing treatment that can

2340 DETERMINING BASIS OF ISSUANCE

After eligibility has been established, households will be assigned a purchase requirement and total coupon allotment based on the adjusted net monthly food stamp income.

The food coupon allotment is based on the Agricultural Research Service's estimate of the average cost of the economy food plan for various household sizes. The Food Stamp Act, as amended in 1973, requires an adjustment of the coupon allotment twice a year to reflect changes in the prices of food as published by the Bureau of Labor Statistics. These changes in the coupon allotment also require revisions in the purchase requirements, particularly for households with income in the higher bracket levels. Purchase requirements are based on household size and income level, but in no event will they exceed 30 percent of income. See the exhibit section of this handbook for the basis of issuance tables.

2341 FREQUENCY OF ISSUANCE

At the time of certification, the household shall be offered a choice of monthly or semimonthly issuance. Quarter-monthly issuance may be offered at the State's option. It is generally to the advantage of the household to have the frequency of coupon issuance geared to the frequency of their receipt of income because they will normally want to plan their purchases of coupons to coincide with their receipt of income. The EW should discuss this with the household so that the household understands it is free to choose any frequency of issuance that it wants. At the same time, the variable purchase options should be explained. Households eligible for public assistance withholding (PAW) should be given the opportunity to elect this method of issuance; however, the EW should explain to the household that the variable purchase options are not available if PAW is selected. The EWs should be familiar enough with issuance operations to answer any questions the household may have about when, where, and how to purchase coupons.

2342 IDENTIFICATION CARD

Each household certified as eligible to participate in the program will be issued an identification (ID) card. This card will be signed by the head of the household or spouse and the authorized representative, if any has been named for the purchase of coupons.

2342.1 RESERVED2342.2 Special ID for Delivered Meal Services

Households in which one or more persons are determined to be eligible to use food stamps in payment for delivered meals (see 2212.3) and express an intent to do so will be issued an ID card which is conspicuously marked with the letter "M". Recipients should be requested to advise the delivered meal service that they plan to use food stamps to purchase delivered meals. Persons who meet the eligibility requirements for delivered meals for only a temporary period, such as while convalescing, will have an expiration date on their ID card.

2342.3 RESERVED2350 NOTIFICATION OF ELIGIBILITY

The State agency is required to determine eligibility or ineligibility within 30 days of receipt of a signed application or affidavit and to notify the applicant of this determination.

2351 NOTIFICATION OF DENIAL

If the application is denied, the EW shall provide the household with written notice explaining the basis for denial and stating the household's right to request a fair hearing.

2352 NOTIFICATION OF APPROVAL

If the application is approved, the EW shall provide the household with written notice of:

- (1) The household's basis of issuance;
- (2) The period of eligibility;
- (3) The household's right to a fair hearing;
- (4) The household's obligation to report changes; and
- (5) The necessity for NPA households to file an application for subsequent certification by a specified time in order to continue receiving benefits or to receive an advance notice of adverse action.

(2404.3)

the household will continue to be responsible for reporting any changes where the State agency does not have full prior knowledge, such as increases in Social Security payments.

As these changes are generally known to the agency well in advance of their effective date, the State agency shall make the necessary food stamp adjustments effective as of the effective date of the change. For instance, States electing to use a utility standard should carefully plan their annual reviews of such standards in a manner which will permit the orderly adjustment of all casefiles where the standard was used by the effective date required for any revision to the standard. In most instances, changes initiated by the State agency will constitute a mass change for which no individual notice of adverse action is required (See 2405.1, 2405.2).

2404.4

Failure to Take Prompt Action

If the EW cannot comply with the requirements of 2404.1, 2404.2, or 2404.3 above, and if coupons are overissued because of such failure, a claim determination report will be filed for agency error. Household liability will be assessed in accordance with FNS recipient claim procedures (See 2050). If the household was overcharged for its coupon allotment or lost program benefits because of EW failure to process the change on a timely basis, a refund will be provided or credit given, as appropriate, to such household in accordance with FNS procedures (See 2051, 2052).

2404.5

PA Unit Coordination

The State agency shall establish procedures and controls to insure that communication is maintained between the PA unit and the food stamp and issuance units to assure that timely action as required in 2404.1, 2404.2 and 2404.3 is taken on changes reported by or affecting PA recipients.

2405

Notice of Adverse Action

Prior to any action to reduce or terminate a household's program benefits within the certification period, the EW shall, except as specified in 2406, provide the household 10 days advance notice before such action is taken. The notice shall explain the reasons for the proposed action, the household's right to request a hearing, and the circumstances under which program participation is continued if a hearing is requested (See 2407). If the household requests a hearing, the EW should

- (2405) explain the continuation of benefits is strictly at the household's option and should the household elect to have its benefits continued, demand will be made for the value of any coupons overissued prior to or during the period such benefits are continued.

2406 Changes Not Requiring Advance Notice

Individual notices of adverse action are not required under the following circumstances:

2406.1 Mass Change

Individual notice of adverse action is not required when mass changes in program benefits are required for certain classes of households because of changes required by Federal or State law or Federal regulations affecting the basis of issuance tables, income standards or other eligibility criteria. Examples of such changes include changes in the maximum income limitations or basis of issuance tables, and changes in Social Security benefits, SSI payments, or PA grants.

2406.2 Notification for Mass Changes

Although individual notice of adverse action is not required under 2406.1, the State agency must publicize the possibility of an impending mass change in food stamp benefits for the affected class of recipients. Such notice may take the form of announcements made through the various news media or can be accomplished through a general notice mailed out with ATP cards or mailed separately, or with notices displayed in the food stamp and welfare offices and various issuance locations.

2406.3 Waiver by the Household

Advance notice may be waived when the head of the household, spouse, or his authorized representative provides the State agency with a written statement that food stamps are no longer desired or supplies information that requires a reduction or termination of benefits. The State agency may develop a form to provide a uniform record for the case file. In any event, the head of the household, spouse, or authorized representative must acknowledge in writing that he knows the required action will be taken and that he waives his right to continuation of benefits should a fair hearing be requested at a later date.

2410 EXPIRATION OF THE CERTIFICATION PERIOD

Upon expiration of the certification period, benefits will be terminated without additional notice or the right to a pre-termination hearing for any household that fails, without good cause, to comply with its notice of recertification requirement.

A household that complies with the recertification notice will be entitled to advance notice of adverse action and given the opportunity for a pre-termination or pre-reduction appeal hearing.

A household whose failure to comply is for good cause, will have its certification continued for one month to allow the household to complete the recertification requirement. The household must establish "good cause" to the EW.

2411 RECIPIENT RESPONSIBILITIES

The household can prevent any lapse in benefits due to the expiration of the certification period by complying with the notice of recertification requirement. This is accomplished by the household's making a timely application, completing the required interview with the EW, and cooperating with EW requests for the additional information or verifications necessary for processing the application in accordance with the time requirements listed in the household's notice of recertification requirement.

2412 DEPARTMENT RESPONSIBILITIES

When a household makes timely application for participation subsequent to the initial period of certification, in compliance with the recertification requirement, the EW must complete a redetermination of eligibility prior to the end of the certification period and send the household an advance notice of the determination.

If the household fails to comply with the notice of recertification requirement and can establish to the EW that its failure to comply was for good cause (such as, but not limited to, illness or unplanned absence which prevents the household from complying), the EW will extend the certification period for one month to allow the household to complete the recertification requirement.

2412.1 NOTICE OF RECERTIFICATION REQUIREMENT

A household will receive at each time of certification, a notice that gives the Department's decision and includes a statement as to the client's recertification requirement. In addition, a household which is certified for three months or more must be sent a separate notice of recertification requirement in the month prior to the last month of certification. That notice shall advise the household that it must contact the WSO, arrange for and complete a new application, be interviewed, and provide required information and verification by the date specified in the notice in order to assure that the household will receive an advance notice and be provided the opportunity for a pre-reduction or pre-termination appeal hearing.

A household which complies with the notice of recertification requirement is entitled to continuation of benefits provided it meets the conditions of 2407.

2423 Responsibilities of Gaining Project Areas

When the household presents a Form FNS -286 to the food stamp office in the new project area, the EW will establish the following factors of eligibility:

2423.1 Form Validity

The form has not been altered and the 60-day eligibility period has not expired.

2423.2 Residence

The household is living in the project area and does not reside in a boarding house or institution.

2423.3 Household Membership

Household membership has not changed. Note that there is an automatic change in household membership when it contains an SSI recipient who transfers from a non cash-out State.

2423.4 Cooking Facilities

Cooking facilities are available (except as provided in 2211).

2423.5 Verification

If information provided by the household regarding any of the items above is questionable, such information must be verified before coupons are issued to the household.

2423.6 Issuance of Coupons

Upon satisfaction that the household meets the required criteria, the EW will:

- (1) Issue the household an identification card.
- (2) Notify the issuance unit to authorize a coupon allotment and purchase requirement based on the adjusted monthly income and household size reported on the Form FNS-286.
- (3) File the form and a copy of the notification sent to the issuance office in the household's case file.

- (4) Record on a separate log the serial number on the form, the name of the head of the household, and the disposition of the case.
- (5) Notify the originating office in the losing project area in writing when the form has been received. The address and telephone number of the originating office should appear on the form. A copy of the notification sent to the issuance office would be sufficient. However, the notification must contain the serial number of Form FNS-286 and the household size and adjusted monthly income for identification purposes.

2424 Moves Within Continued Certification

If the household intends to move again during the same 60-day period before using its entire authorization, the EW will complete a new Form FNS-286 for the household. The new form will indicate the remaining coupon entitlement the household is entitled to purchase in the gaining project area and will have the same expiration date as the original form.

2425 Expiration of Continued Certification

At the expiration of the 60-day continuation of certification, the household must be certified under normal procedures before any further entitlement to food stamps can be established. The household shall not be eligible for an additional 60-day continuation of certification unless certification under normal procedures has occurred, the household is certified as eligible on the day it moves, and meets all the other criteria in 2422. Households may request certification at any time during the 60-day period; however, the remaining portion of the period is forfeited by such certification.

2426 Security and Control of Form FNS-286

State and local agencies are required to take all precautions necessary to prevent or detect unauthorized use of Forms FNS-286 and shall safeguard these forms from theft, embezzlement, loss, damage, or destruction.

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WELFARE
OFFICE OF ASSISTANCE PAYMENTS
FOOD STAMP PROGRAM

FOOD STAMP PROGRAM CERTIFICATION HANDBOOK
SUPPLEMENT II

POLICY ON VERIFICATIONS

INTRODUCTION

The Massachusetts Food Stamp Program Certification Handbook points to the material given in this Supplement. In paragraph 2123.1 it is declared, "The State Agency should provide Eligibility Workers with guidelines to determine when additional verification is required."

The objectives of this Supplement are to provide a thorough set of guidelines on verification and to specify the manner by which the applicant and the recipient must be notified of these verification requirements.

The guidelines in this Supplement reduce some, but not all, of the individual judgements called for in the Handbook to standard prescriptions for Massachusetts. The guidelines are presented in four sections as follows:

SECTION A - Minimum federal requirements.

SECTION B - Minimum added state requirements. These are situations or items subject to a Department mandate that prudence will require verifications in all cases.

SECTION C - Additional state requirements. These are situations or items subject to a Department mandate that prudence will require verifications only when, in the individual judgement of the eligibility worker, the information submitted is extremely questionable for reasons of incompleteness or inconsistency. Illustrations are given of grounds to find information "extremely questionable".

SECTION D - No additional state requirements, i.e., situations or items where prudence does not call for verifications.

The guidelines will be followed by procedures for notifying applicants and recipients of verification requirements.

Note: Where the reference "See Handbook" is encountered, the reader will find at the end of the Handbook an alphabetical index keyed to the appropriate paragraph(s) for each subject.

MASSACHUSETTS FOOD STAMP PROGRAM ISSUANCE TABLES EFFECTIVE 1/1/79 - 2/28/79

*MAXIMUM INCOME-NPA	279	367	507	640	760	913	1,007	1,153
HOUSEHOLD SIZE	1	2	3	4	5	6	7	8
COUPON ALLOTMENT	\$58	\$106	\$152	\$192	\$228	\$274	\$302	\$346
MONTHLY ADJUSTMENT								
INCOME RANGE	PURCHASE REQUIREMENT							
0 - 19.99	0	0	0	0	0	0	0	0
20 - 29.99	1	1	0	0	0	0	0	0
30 - 39.99	4	4	4	4	5	5	5	5
40 - 49.99	6	7	7	7	8	8	8	8
50 - 59.99	8	10	10	10	11	11	12	12
60 - 69.99	10	12	13	13	14	14	15	16
70 - 79.99	12	15	16	16	17	17	18	19
80 - 89.99	14	18	19	19	20	21	21	22
90 - 99.99	16	21	21	22	23	24	25	26
100 - 109.99	18	23	24	25	26	27	28	29
110 - 119.99	21	26	27	28	29	31	32	33
120 - 129.99	24	29	30	31	33	34	35	36
130 - 139.99	27	32	33	34	36	37	38	39
140 - 149.99	30	35	36	37	39	40	41	42
150 - 169.99	33	38	40	41	42	43	44	45
170 - 189.99	39	44	46	47	48	49	50	51
190 - 209.99	45	50	52	53	54	55	56	57
210 - 229.99	48	56	58	59	60	61	62	63
230 - 249.99	48	62	64	65	66	67	68	69
250 - 269.99	48	68	70	71	72	73	74	75
270 - 279.00*	48*	74	76	77	78	79	80	81
279.01 - 289.99		74	76	77	78	79	80	81
290 - 309.99		80	82	83	84	85	86	87
310 - 329.99		86	88	89	90	91	92	93
330 - 359.99		86	94	95	96	97	98	99
360 - 367.00*		86*	103	104	105	106	107	108
367.01 - 389.99			103	104	105	106	107	108
390 - 419.99			112	113	114	115	116	117
420 - 449.99			121	122	123	124	125	126
450 - 479.99			130	131	132	133	134	135
480 - 507.00*			134*	140	141	142	143	144
507.01 - 509.99				140	141	142	143	144
510 - 539.99				149	150	151	152	153
540 - 569.99				158	159	160	161	162
570 - 599.99				167	168	169	170	171
600 - 629.99				168	177	178	179	180
630 - 640.00*				168*	186	187	188	189
640.01 - 659.99					186	187	188	189
660 - 689.99					195	196	197	198
690 - 719.99					200	205	206	207
720 - 749.99					200	214	215	216
750 - 760.00*					200*	223	224	225
760.01 - 779.99						223	224	225
780 - 809.99						232	233	234
810 - 839.99						241	242	243
840 - 869.99						242	251	252
870 - 899.99						242	260	261
900 - 913.00*						242*	266	270
913.01 - 929.99							266	270
930 - 959.99							266	279
960 - 989.99							266	288
990 - 1,007.00*							266*	297
1,007.01 - 1,019.99								297
1,020 - 1,153.00								306*

HOW TO USE ISSUANCE TABLES

1. **HOUSEHOLD SIZE** - This horizontal line indicates the number of persons in a household.
2. **COUPON ALLOTMENT** - This line denotes the buying value of the coupons a household is allowed monthly.
3. **MONTHLY ADJUSTED INCOME RANGE** - This vertical column on left side indicates a scale of actual Food Stamp monthly adjusted net income.
4. **PURCHASE REQUIREMENT** - This is the amount a household pays for a monthly allotment of stamps. It is determined by the household size and the particular adjusted Food Stamp net income.
5. To use the table: On the left find the specific monthly income range into which the actual net adjusted income falls; e.g., \$640 falls between \$630 and \$659.99. From that point follow across to the right on the same line to the figure in the vertical column which is headed by the household size. This figure (the Purchase Requirement) indicates how much a household pays for its monthly allotment of stamps. For example, a household of 8 with an adjusted net income of \$640 must pay \$189 for \$346 worth of food stamps.

FOR HOUSEHOLDS LARGER THAN EIGHT PERSONS

I. Table Computations -

Individual tables for household sizes 1 thru 20 to be included in the Food Stamp Certification Handbook.

II. Formula Computations (for use whenever tables are not available) -

- A. **Coupon Allotment.** For each person in excess of eight, add \$44 to the base of \$346 (the coupon allotment for an eight person household).

H.H. of 9 - \$390	H.H. of 13 - \$566	H.H. of 17 - \$742
" " 10 - \$434	" " 14 - \$610	" " 18 - \$786
" " 11 - \$478	" " 15 - \$654	" " 19 - \$830
" " 12 - \$522	" " 16 - \$698	" " 20 - \$874

B. Purchase Requirement

1. For households larger than eight persons with incomes of less than \$1,020 per month: Use the purchase requirement shown for an eight person household.
2. For households larger than eight persons with incomes of \$1,020 or more per month: For each \$30 (or portion thereof) over \$1,019.99 per month, add \$9 to the base of \$297 (the monthly purchase requirement for an eight person household with an income of \$1,019.99).

However, in no case shall the household be given a larger purchase requirement than:

Household of 9 - \$346	Household of 15 - \$586
" " 10 - \$386	" " 16 - \$626
" " 11 - \$426	" " 17 - \$666
" " 12 - \$466	" " 18 - \$706
" " 13 - \$506	" " 19 - \$746
" " 14 - \$546	" " 20 - \$786

REPLACEMENT OF INCORRECT ATP'S IN CORRECTED AMOUNTS

A. General Information

PA and NPA recipients can under circumstances described in B have their Authorizations to Purchase (ATP's) replaced over-the-counter in corrected amounts to which the recipients are entitled by returning their current month's unused whole or half ATP and having it reissued in corrected amounts. This procedure may be used instead of crediting the recipient with a cash refund or forward adjustment or both, or requiring a claim determination in the case of over-participation.

The Department will inform all recipients about the availability of these procedures.

B. Conditions of Entitlement for Replacements

1. Agency Delay - According to paragraph 2404.2 of the Food Stamp Program Certification Handbook, the Eligibility Worker must make recipient initiated changes effective for not later than the first issuance period following ten (10) days from the date notification was received. Failure of the Department to meet that minimum requirement will entitle the household to select this procedure for replacement of ATP's in corrected amounts.
2. Agency Error - An incorrect coupon allotment or purchase requirement due to agency error other than B-1 above will entitle the household to select the above procedure for replacement of ATP's in corrected amounts.
3. Changes - Households which have a change in circumstances that makes them eligible for a zero purchase requirement ATP in the month of request or receive an increase of more than \$25 over the previous month's utility bills shall be eligible for the above procedure for replacement of ATP's in corrected amounts.

C. Procedures for Replacements

1. Each WSO and ATP Issuance Office must designate individuals and back-up for handling over-the-counter issuance of ATP's.
2. The household must surrender their current month's unused whole or half (See Section D of this Supplement) ATP and sign a Request for Correction or Exchange of ATP (FSR-6) at the WSO. The FSR-6 is completed in duplicate with original given to the recipient, the duplicate being placed in the case folder. The computer entry portion of the FSR-6 need not be completed (See Item #6).
3. The Eligibility Worker will complete Form FSP-14 Over-the-Counter ATP Request Form in triplicate for the month in which the household applies. The original and one copy is given to the office designee who either completes the ATP or transmits the information from the FSP-14 to the issuance office so that an over-the-counter ATP can be created the same day. The last copy is placed in the case folder.

4. The household will be presented with the option of picking up the ATP from the issuance office, courier service to the local office from the issuance office when available and useful, or having the ATP being placed in that day's mail by the issuance office.
5. The Eligibility Worker will mark "Void - Replaced by Over-the-Counter ATP" on the original ATP and attach it to the copy of the FSP-14 that is given to the office designee.
6. The Eligibility Worker will complete the Turnaround Document (TD) to correct the next month's ATP issuance. The TD remarks section shall include the notation "Over-the-Counter Corrected ATP Issued".
7. Any forward adjustment deducted from the original ATP will have to be resubmitted to the RDCU by means of the TD form.
8. The Issuance Office will establish a time cut-off, not before 3 P.M., for these procedures to allow for completion of the ATP document.
9. If the recipient or his representative does not pick up the ATP at the Issuance Office prior to the latest available mail pick-up in the particular community and courier service is not used, the Issuance Office designee will insure that the ATP will be placed in that day's mail.

D. Special Procedures for Correcting Half Month ATP's
(The household has cashed one side of a two-sided incorrect ATP)

1. Agency Delay and Agency Error cases: If the household is eligible to receive a corrected ATP due to Agency delay or error but has already used half of the two-sided ATP, then the household can receive the correct one half month amounts through a replacement that month of the unused half of the ATP. Steps 1-9 of Section C, above, will be implemented.
Note: In order to restore lost benefits a Cash Refund Procedure (Supplement IV) must be completed for the negotiated half of the two-sided ATP unless the Agency error was simply an insufficient coupon allotment in which case a Forward Adjustment (Supplement I) will suffice.
2. Change cases: If the household due to a change in circumstances is eligible for a zero-purchase ATP for the whole current month or eligible for a lower purchase requirement due to an increase of more than \$25 over the previous month's utility bills, but has already used one half of the two-sided ATP, then the unused half of the ATP can be replaced. Steps 1-9 of Section C, above, will be implemented.
Note: No retroactive benefits are due the household for the negotiated half of the two-sided ATP.

2320 ELIGIBILITY DETERMINATIONS FOR SPECIFIC HOUSEHOLDS
 2321 Earned Income
 2322 PA Recipients
 2323 SSI Recipients
 2324 Self-Employed Households
 2325 Resident Farm Labor
 2326 Migrant Farm Laborers
 2327 School Employees
 2328 Students
 2329 Strikers
 2330 Narcotics Addicts and Alcoholics
 2331 Ineligible Aliens
 2332 Zero Purchase Households
 2340 DETERMINING BASIS OF ISSUANCE
 2341 FREQUENCY OF ISSUANCE
 2342 IDENTIFICATION CARD
 2350 NOTIFICATION OF ELIGIBILITY
 2351 Notification of Denial
 2352 Notification of Approval

2400 ADDITIONAL CERTIFICATION FUNCTIONS

2401 CHANGES DURING THE CERTIFICATION PERIOD
 2402 Desk Reviews
 2403 Recipient Responsibilities
 2404 State Agency Responsibilities
 2405 Notice of Adverse Action
 2406 Changes Not Requiring Advance Notice
 2407 Continuation of Benefits
 2410 EXPIRATION OF THE CERTIFICATION PERIOD
 2411 Recipient Responsibilities
 2412 Department Responsibilities
 2413 Verification
 2420 60-DAY CONTINUATION OF CERTIFICATION
 2421 Certification of Household Transfer
 2422 Responsibilities of Losing Project Areas
 2423 Responsibilities of Gaining Project Areas
 2424 Moves Within Continued Certification
 2425 Expiration of Continued Certification
 2426 Security and Control of Form FNS-286
 2427 Reporting Requirement
 2430 NONUSE OF ATP CARDS

2500 FAIR HEARINGS

2501 Definitions
 2510 HEARING REQUEST
 2511 State Agency Assistance
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2520	GROUP HEARINGS
2530	PARTICIPATION DURING APPEAL
2531	Reduction or Termination Prior to Hearing Decision
2532	Notification
2540	HEARING PROCEDURE
2541	Hearing Official
2542	Fact-Policy Distinction
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2550	HEARING DECISION
2551	Hearing Authority
2552	Decision Format
2553	Notification of Claimant
2554	Appeal Rights of Claimant
2560	FINAL ADMINISTRATIVE ACTION
2561	Agency Responsibilities
2562	Adjustments After Decision

2563 MASSACHUSETTS FOOD STAMP PROGRAM ISSUANCE TABLES EFFECTIVE 7/1/78 - 12/31/78

HOUSEHOLD SIZE			1	2	3	4	5	6	7	8
COUPON ALLOTMENT			\$54	\$100	\$144	\$182	\$216	\$260	\$286	\$328
MONTHLY ADJUSTMENT			PURCHASE REQUIREMENT							
INCOME RANGE										
0	-	19.99	0	0	0	0	0	0	0	0
20	-	29.99	1	1	0	0	0	0	0	0
30	-	39.99	4	4	4	4	5	5	5	5
40	-	49.99	6	7	7	7	8	8	8	8
50	-	59.99	8	10	10	10	11	11	12	12
60	-	69.99	10	12	13	13	14	14	15	16
70	-	79.99	12	15	16	16	17	17	18	19
80	-	89.99	14	18	19	19	20	21	21	22
90	-	99.99	16	21	21	22	23	24	25	26
100	-	109.99	18	23	24	25	26	27	28	29
110	-	119.99	21	26	27	28	29	31	32	33
120	-	129.99	24	29	30	31	33	34	35	36
130	-	139.99	27	32	33	34	36	37	38	39
140	-	149.99	30	35	36	37	39	40	41	42
150	-	169.99	33	38	40	41	42	43	44	45
170	-	189.99	39	44	46	47	48	49	50	51
190	-	209.99	42	50	52	53	54	55	56	57
210	-	229.99	44	56	58	59	60	61	62	63
230	-	249.99	44	62	64	65	66	67	68	69
250	-	269.99	44	68	70	71	72	73	74	75
270	-	277.00*	44*	68	70	71	72	73	74	75
277.01-	289.99			74	76	77	78	79	80	81
290	-	309.99		80	82	83	84	85	86	87
310	-	329.99		80	88	89	90	91	92	93
330	-	359.99		80	94	95	96	97	98	99
360	-	363.00*		80*	94	95	96	97	98	99
363.01-	389.99	*Below are the NPA		103	104	105	106	107	108	
390	-	419.99 maximum adjusted		112	113	114	115	116	117	
420	-	449.99 net income levels.		121	122	123	124	125	126	
450	-	479.99 NPA households		126	131	132	133	134	135	
480	-	480.00*over these monthly		126*	140	141	142	143	144	
480.01-	509.99	are not eligible for the			140	141	142	143	144	
510	-	539.99 Food Stamp Program:			149	150	151	152	153	
540	-	569.99 HOUSEHOLD		MAXIMUM	158	159	160	161	162	
570	-	599.99 SIZE		INCOME	158	168	169	170	171	
601	-	607.00*one		\$277	158*	168	169	170	171	
607.01-	629.99	two		\$363		177	178	179	180	
630	-	659.00 three		\$480		186	187	188	189	
660	-	689.99 four		\$607		188	196	197	198	
690	-	719.99 five		\$720		188	196	197	198	
720	-	720.00*six		\$867		188*	214	215	216	
720.01-	749.99	seven		\$953			214	215	216	
750	-	779.99 eight		\$1093			223	224	225	
780	-	809.99 EACH ADDITIONAL MEMBER		+140			228	233	234	
810	-	839.99					228	242	243	
840	-	867.00*					228*	250	243	
867.01-	869.99							250	252	
870	-	899.99						250	261	
900	-	929.99						250	270	
930	-	953.00*						250*	279	
953.01-	959.99								279	
960	-	1093.00*							288*	

(2563)

EFFECTIVE 7/1/78 - 12/31/78

HOW TO USE ISSUANCE TABLES

1. **HOUSEHOLD SIZE** - This horizontal line indicates the number of persons in a household.
2. **COUPON ALLOTMENT** - This line denotes the buying value of the coupons a household is allowed monthly.
3. **MONTHLY ADJUSTED INCOME RANGE** - This vertical column on left side indicates a scale of actual Food Stamp monthly adjusted net income.
4. **PURCHASE REQUIREMENT** - This is the amount a household pays for a monthly allotment of stamps. It is determined by the household size and the particular adjusted Food Stamp net income.
5. **To use the table:** On the left find the specific monthly income range into which the actual net adjusted income falls; e.g., \$640 falls between \$630 and \$659.99. From that point follow across to the right on the same line to the figure in the vertical column which is headed by the household size. This figure (the Purchase Requirement) indicates how much a household pays for its monthly allotment of stamps. For example, a household of 8 with an adjusted net income of \$640 must pay \$189 for \$328 worth of food stamps.

FOR HOUSEHOLDS LARGER THAN EIGHT PERSONS

I. Table Computations -

Individual tables for household sizes 1 thru 20 are included in the Food Stamp Certification Handbook, Exhibit A (effective 7/1/78 - 12/31/78).

II. Formula Computations (for use whenever tables are not available) -

A. **Coupon Allotment.** For each person in excess of eight, add \$42 to the base of \$328 (the coupon allotment for an eight person household).

B. **Purchase Requirement.**

1. For households larger than eight persons with incomes of less than \$960 per month: Use the purchase requirement shown for an eight person household.
2. For households larger than eight persons with incomes of \$960 or more per month: For each \$30 (or portion thereof) over \$959.99 per month, add \$9 to the base of \$288 (the monthly purchase requirement for an eight person household with an income of \$959.99).

However, in no case shall the household be given a larger purchase requirement than:

Household of	9	-	\$326	Household of	15	-	\$554		
"	"	10	-	\$364	"	"	16	-	\$592
"	"	11	-	\$402	"	"	17	-	\$630
"	"	12	-	\$440	"	"	18	-	\$668
"	"	13	-	\$478	"	"	19	-	\$706
"	"	14	-	\$516	"	"	20	-	\$744

SUPPLEMENT VIII

4. If the replacement is for a mutilated ATP, the Eligibility Worker will mark "VOID REPLACED BY OVER-THE-COUNTER ATP" on the original ATP and attach it to the copy of the FSP-14 given to the office designee.
5. If an Over-the-Counter issued ATP is being replaced, the Eligibility Worker will write "Over-the-Counter" in the block "ATP No." of the FSR-1.
6. The Eligibility Worker must have the recipient fill out the Statement of Loss Form (FSR-1). He will explain to the recipient that the FSR-1 must be signed and witnessed, and that the recipient is attesting to the fact that the ATP was not cashed by the recipient (or on behalf of the recipient) and if he receives or recovers the original ATP, he will return the ATP to the WSO.

The worker must inform a recipient who reports an undelivered ATP that the Postal Inspection Service will be informed of this loss if a duplicate transaction occurs.

7. The FSR-1 should be completed in duplicate with the original given to the recipient and the copy placed in the case folder. The folder should be checked for previous FSR-1's to see if undelivered ATP's is a persistent problem. The computer entry portion of the form need not be completed.
8. The Eligibility Worker will complete Form FSP-14, Over-the-Counter ATP Request Form in triplicate and forward the original and first copy to the office designee who either completes the ATP or transmits the information from the FSP-14 to the Issuance Office so that an Over-the-Counter ATP can be created the same day. The last copy is placed in the case folder.
9. The household will be presented with the options of: picking up the ATP from the Issuance Office; courier service to the local office from the Issuance Office when available and useful; having the ATP placed in that day's mail by the Issuance Office.
10. The Issuance Office will establish a time cut-off, not before 3 P.M., for these procedures to allow for completion of the ATP document.
11. If courier service is not used, the Issuance Office designee will insure that the ATP will be placed in the mail if the emergency household or its representative does not pick it up at the Issuance Office prior to the latest available mail pick-up time in the particular community.

D. Potential Overutilization of Food Stamps

1. When the Eligibility Worker has sound reason to doubt the validity of the claim, as in instances of recurring reports of lost ATP's, the matter should be referred to the WSO Director or his designee for a decision on replacing the ATP.
2. The redemption for food coupons of both the original and replacement ATP's will be recorded on the Overutilization Report (FSP-248). When overutilization occurs, then a Claim Determination must be initiated as prescribed in Supplement V of the Massachusetts Food Stamp Certification Handbook.

E. Report to Postal Inspection Service

1. Each month the CSAO/WSO Director or designee must send a letter to the Postal Inspection Service reporting any of the situations given below. (Sample Attached)
 - a. There is a pattern of mail loss (e.g., a number of ATP's lost in the same geographic area or a recipient consistently does not receive ATP's).
 - b. All cases identified in D. 2 above where both the original and replacement ATP's are transacted, as indicated on the Overutilization Report, and the reason for replacement was that the original ATP was undelivered.
2. The letter must include the recipient's name, address and the month(s) in which ATP's were reported to be undelivered. If the letter involves a pattern of mail loss in a particular geographic area, that area should be indicated as well. Copies of all letters must be kept on file and made accessible to USDA auditors on request. The address of the Postal Inspection Service is:

Postal Inspection Service
United States Postal Service
Post Office Building
Devonshire Street
Boston, Massachusetts 02210

Sample Letter
(Use Parts That Apply)

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WELFARE
(Office Address)

Date _____

Postal Inspection Service
United States Postal Service
Post Office Building
Devonshire Street
Boston, Massachusetts 02210

To Whom It Concerns:

In compliance with United States Department of Agriculture Regulations we are bringing to your attention the following situations which have occurred within our jurisdiction.

In the geographic area of _____ we have received reports from the following food stamp recipients that Authorizations to Purchase Food Stamps have not been delivered during the month of _____.

Name

Address

The following food stamp recipients have consistently reported Authorizations to Purchase Food Stamps were undelivered.

Name

Address

Dates of Reported Loss

The following food stamp recipients have reported Authorizations to Purchase Food Stamps were not delivered and subsequently the ATP's were cashed.

Name

Address

Dates of Reported Loss

Yours truly,

6. The fiscal clerk will batch the SS9A and new SS9F's and forward them to the RDCU no later than the next working day.
The "change" SS9F's must be held by the fiscal clerk until after the first of the next month ATP issuance.
7. The WSO will provide the emergency household with an identification card (FSP-3). The household shall be presented with the option of picking up the ATP from the issuance office, courier service to the local office from the issuance office when available and useful, or having the ATP being placed in that day's mail by the Issuance Office.
8. The Issuance Offices will establish a time cut-off, not before 3 P.M., for these procedures to allow completion of the ATP document.
9. If courier service is not used, the Issuance Office designee will insure that the ATP will be placed in the mail if the emergency household or its representative does not pick up at the Issuance Office prior to the latest available mail pick-up time in the particular community.

III. MIGRANT FARM LABORER HOUSEHOLDS

A. Half Month Certification Period

1. Date of application is the 15th of the month or earlier, and income from a new source has not yet been received but is expected between the date of application and the 15th of the month and this anticipated income will put the household above the zero purchase level if figured for the entire month.
2. Date of application is after the 15th of the month and income from a new source has not yet been received but is expected prior to the end of the month and this anticipated income will put the household above the zero purchase level if figured for the entire month.
3. Migrant farm laborer households do not have to be at the zero purchase level to receive a half month OTC-ATP. For those households who are certified for a half month, an Over-the-Counter is currently the only way the Department can issue half a month's coupon allotment. This applies only to migrant farm laborer households.
4. Migrant farm laborers can be certified more than once for a half month certification period. Thus in some instances they may receive two half month OTC-ATPs.
5. All other procedures in either I.B. above (NPA) or II.B. above (PA) will also apply to migrants.

B. Full Month Certification Period

1. Date of application is prior to the 16th of the month and income will be received after the 15th of the month.
2. Date of application is anytime during the month and applicant is eligible at the zero purchase level counting all income received and anticipated during the month.
3. For those migrants certified for one month follow procedures in I above for NPA households or II above for PA households.

NOTE: The intent of the migrant procedures is to provide assistance by disregarding new income in the half month it is anticipated to be received and considering it in the following half month period. That temporary disregard may make the migrant eligible for an over-the-counter ATP for a half month or whole month.

EMERGENCY FOOD STAMP ASSISTANCE IN DISASTER

I. AUTHORITY

The authority for the issuance of emergency food coupon allotments is granted in the Disaster Relief Act of 1970 and the Food Stamp Act of 1964 as amended.

The provisions of this section cannot be used without the specific authorization of the Food and Nutrition Service of the U.S. Department of Agriculture following a declaration by the President of a major disaster and other disaster periods declared by Food and Nutrition Service. The authorization by FNS will specify the disaster area and the period for which an over-the-counter zero purchase ATP for eligible households may be given. That authorization must be officially communicated to the CSA/WSO and eligibility workers by the Central Office of the Massachusetts Department of Public Welfare. Only then can these provisions be used.

II. INTRODUCTION

The Emergency Food Stamp Assistance in Disaster Program is specifically designed to provide immediate relief to all people in need of food assistance because of a disaster situation. Eligibility will be based on a self-declaration application. No additional data will be required to determine eligibility, but the statements of the applicant may be subject to review and verification by Quality Control.

The benefit provided to the household will be a zero purchase over-the-counter ATP.

III. ELIGIBILITY AND CERTIFICATION

Due to emergency conditions, it is possible that more than one family will occupy a dwelling. Therefore, applicant groups or individuals sharing common living quarters may be certified as separate households.

The following eligibility requirements must be met for certification of households under the provisions of Emergency Food Stamp Assistance in Disaster. No other eligibility requirements will be imposed.

A. Eligibility Requirements

1. The household will be eligible for Emergency Food Stamp Assistance in Disaster only once during the time period authorized by FNS. If a new period is authorized by FNS, the household must re-apply. No emergency food coupon allotment shall be authorized or issued after the expiration of the authorized period.

Previous authorized participation in the ongoing Food Stamp Program, even when the household has already purchased food coupons during the month in which the disaster occurs, shall not preclude a second issuance in accordance with these procedures. A second issuance shall be made if it appears that due to the disaster the household is unable to make the previously authorized purchase, it has lost previously purchase coupons, or it has lost stocks of food acquired through the use of food coupons and meets the other eligibility requirements.

2. The household resides either temporarily or permanently within the geographical limits of the disaster area as specified by FNS.
3. The household is in need of food stamp assistance because of a reduction in or inaccessibility of income or cash.
4. The household has access to cooking facilities.

B. Certification Procedures

1. The household must complete and have the head of the household, or spouse, or authorized representative sign FSP-16. That is the application form for Emergency Food Stamp Assistance in Disaster as well as the request for a zero purchase over-the-counter ATP.
2. The individual functioning as the EW must review the application to determine if the applicant's statements meet the Emergency Food Stamp Assistance in Disaster eligibility requirements.
3. When the household fails to meet the disaster eligibility requirements, they must be given notice of denial form FSP-2A and be advised that they may apply for food stamp assistance in accordance with ongoing program requirements.
4. When the household is determined to be eligible:
 - a. They must be given form FSP-3 Food Stamp Identification Card.
 - b. They must be given a zero purchase ATP card over-the-counter with coupon allotment based on household size for the period authorized by FNS (one-half or whole month).
 - c. They must be given form FSP-2 Notice of Approval which informs them where stamps may be purchased, proper use of coupons, and that the benefit is only for the specified period. Further benefits can be given only as the result of an approval of a new application for a later time period. (If FNS extends the disaster period, the household will have to make a new application for further benefits.)

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE

FOOD STAMP PROGRAM

FSP-16 (12/77) APPLICATION FOR EMERGENCY FOOD STAMP ASSISTANCE IN DISASTER

NAME _____ FAMILY SIZE _____

S.S.# _____

ADDRESS _____ (If temporary, list _____
Permanent Address) _____

NAME OF ALL OTHER HOUSEHOLD MEMBERS _____

Number of persons in my household who are already certified to participate in the regular Food Stamp Program _____.

I declare under penalty of fine or imprisonment:

1. My household has not previously applied for emergency food stamp assistance during this disaster for this issuance period;
2. The members of my household reside at the address given above;
3. My household is in need of emergency food stamp assistance because of a reduction in or inaccessibility of income or cash resources as a result of the disaster;
4. If anyone in the household has been certified to participate in the ongoing Food Stamp Program, I further declare that due to the disaster the household was unable to make the previously authorized purchase, has lost the previously purchased coupons, or has lost stocks of food acquired through the use of food coupons; and
5. My household has access to cooking facilities.

I understand that any unauthorized use, transfer, acquisition, possession, or presentation of food coupons may subject me to legal prosecution. I give permission for you to verify my household situation and my financial circumstances.

(Signature of Applicant or Authorized Representative) _____ (Date)

☐ HOUSEHOLD INELIGIBLE, GIVEN FSP-2A NOTICE OF DENIAL

☐ HOUSEHOLD ELIGIBLE, GIVEN FSP-2 NOTICE OF APPROVAL FOR A ZERO PURCHASE OVER THE COUNTER ATP WITH COUPON ALLOTMENT OF _____ FOR THE ISSUANCE PERIOD OF _____ TO _____ AND A FSP-3 FOOD STAMP IDENTIFICATION CARD.

(Signature of Applicant or Authorized Representative indicating receipt of item(s) specified in checked block)

(Certifier's Signature, Place of Certification and Date)

MASSACHUSETTS DEPARTMENT OF PUBLIC WELFARE

FOOD STAMP PROGRAM

FSP-16 REVERSE

REQUEST FOR A ZERO PURCHASE OVER-THE-COUNTER DISASTER ATP

Check appropriate box(es):

1. ☐ Mail ATP card to client.
2. ☐ Hold ATP card. Client will pick up.
3. ☐ Submit ATP card for courier service, if available.
4. ☐ Give to client.

PRINT necessary data to complete ATP:

Region WSO Cat. Social Security Number Check Type of H.H.

<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	1 NPA
--------------------------	--	--------------------------	---	--------------------------	-------

Name			
	Last	First	Middle Initial

2 PA

Address _____

City/Town _____ Zip Code _____

H.H. Size	Net Adjusted Income	MONTHLY Coupon Allotment	MONTHLY Purchase Requirement	Check One:
<input type="checkbox"/> <input type="checkbox"/>	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="checkbox"/> Full Month Allotment
				<input type="checkbox"/> Half Month Allotment

Eligibility Worker's Signature _____

Date Requested _____

Supervisor's Signature _____

FOR OFFICE USE ONLY

Date Transmitted/Received _____

Time _____

Issue Date of ATP					
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
M	M	D	D	Y	Y

Over the Counter ATP Number Issued							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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